State of Wisconsin
DEPARTMENT OF NATURAL RESOURCES
Oshkosh Service Center
625 E. County Road Y, Suite 700
Oshkosh WI 54901-9731

Scott Walker, Governor
Cathy Stepp, Secretary
Telephone 608-266-2621
Toll Free 1-888-936-7463
TTY Access via relay - 711

July 19, 2017

Peggi Hall, Registered Agent
Container Life Cycle Management, LLC
6930 S 6th Street
Oak Creek, Wisconsin 53154

Certified Mail / Return Receipt
Casetrack # 2017-SEEE-017
Milwaukee County

C T Corporation System
Greif, Inc
301 S. Bedford Street, Suite 1
Madison, Wisconsin 53703

Timothy Higgins
Mid-America Steel Drum Company, Inc
8570 S Chicago Road
Oak Creek, Wisconsin 53154

Subject: NOTICE OF VIOLATION / ENFORCEMENT CONFERENCE – August 9, 2017

Dear Ms. Hall, C T Corporation, and Mr. Higgins:

The Department of Natural Resources (department) has reason to believe Container Life Cycle Management, LLC (CLCM), Greif Inc (Greif), and Mid-America Steel Drum Company Inc (MASD) are in violation of Wisconsin's hazardous waste laws. The violations are based on site visits and Compliance Evaluation Inspection(s) (CEI) conducted by the department on February 24, February 28, March 2, March 15, and March 22, 2017.

Three industrial locations are subject to this Notice of Violation:

- 2300 W Cornell Street, Milwaukee, Milwaukee County, Wisconsin (Cornell St, Milwaukee Site) – At the Cornell St Site, CLCM processes / washes totes (typically 275 and 330 gallon totes). CLCM is an indirect joint venture subsidiary of Greif, of which Greif is the principal and majority owner. Department site visits: February 24, 2017; CEI: March 22, 2017 (collectively referred to as Milwaukee Inspections).

- 3950 S Pennsylvania Avenue, St. Francis, Milwaukee County, Wisconsin (Pennsylvania Ave, St Francis Site) – At the Pennsylvania Ave Site, CLCM processes / washes approximately 1,700 drums per day. Drums are staged in trailers for up to 60 days, until needed. The trailers are owned and operated by MASD. CLCM is an indirect joint venture subsidiary of Greif, of which Greif is the principal and majority owner. Department site visits: February 24 and 28, 2017; CEI: March 22, 2017 (collectively referred to as St Francis Inspections).

- 8570 S Chicago Road, Oak Creek, Milwaukee County, Wisconsin (Chicago Rd, Oak Creek Site) – At the Chicago Rd Site, CLCM operates a drum reconditioning facility. The reconditioning process includes the use of an incinerator to burn the drum's contents. Drums are staged in trailers for up to 30 days, until needed. Some of the trailers are owned and operated by MASD. CLCM is an indirect joint venture subsidiary of Greif, of which Greif is the principal and majority owner. Department site visits: February 24 and March 2, 2017; CEI: March 15, 2017 (collectively referred to as Oak Creek Inspections).

The department alleges the following violations:

Cornell St, Milwaukee Site:

STORAGE OF HAZARDOUS WASTE WITHOUT A LICENSE (CLCM / Greif)

1. **Section 291.25(2)(b), Wis. Stats. states no person may operate a hazardous waste facility without an interim or operating license issued under this section.**

   Section NR 670.001(3), Wis. Adm. Code states s. 291.25(2), Wis. Stats. requires a license for the operation of a treatment, storage or disposal facility where any hazardous waste identified or listed in ch. NR 661, Wis. Adm. Code is managed.

During the Milwaukee Inspections, the department learned semitrailer loads of totes are immediately off loaded from trailers arriving from one of three origination points: Pennsylvania Ave, St Francis Site; Chicago Rd, Oak Creek Site; or directly from customers. Approximately 20 to 180 totes arrive daily. The Cornell St, Milwaukee Site is able to process / wash approximately 60 to 80 totes a day. As a semitrailer is unloaded, totes that obviously contain material, by sight and feel, are set aside. These totes are classified as "heavies". The heavies are tracked by CLCM and have been reported to stay at the site awaiting customer pick-up for a period of time.

During the March CEI, the department observed two totes in the "heavy" area, one of which had a label indicating the tote contained a class 3 flammable liquid, acetone (a D001 hazardous waste). A facility representative stated the totes needed to be returned to the customer because the totes were not "empty" and that the storing of non-empty totes in the "heavy" area was a routine practice.

A search of the department's database confirms the Cornell St, Milwaukee Site / CLCM / Greif do not possess a hazardous waste storage license.

Pennsylvania Ave, St Francis Site:

STORAGE OF HAZARDOUS WASTE WITHOUT A LICENSE (CLCM / Greif)

2. **Section 291.25(2)(b), Wis. Stats. states no person may operate a hazardous waste facility without an interim or operating license issued under this section.**

   Section NR 670.001(3), Wis. Adm. Code states s. 291.25(2), Wis. Stats. requires a license for the operation of a treatment, storage or disposal facility where any hazardous waste identified or listed in ch. NR 661, Wis. Adm. Code is managed.

During the St Francis Inspections, the department learned semitrailer loads are temporarily staged for up to 60 days, until there is a need for a specific type of drum. When a drum type is needed, the semitrailer is brought from the staging area to the sorting dock. As the semitrailer is unloaded by hand, drums that obviously contain material, by sight and feel, are set aside. These drums are classified as "heavies". The heavies are tracked by CLCM and have been reported to stay at the site awaiting customer pick-up for a period of time

During the March CEI, the department observed over 40 drums / totes in the "heavy" area. A facility representative stated the containers needed to be returned to the customer because they were not "empty". Of the containers in the "heavy" area, the department identified containers as holding hazardous waste:

- Numerous 55-gallon drums with labeling indicating the drums contain a class 3 flammable liquid. Class 3 flammable liquids have a flash point at or below 140 °F (60 °C). Wastes that are hazardous due to the ignitability characteristic include liquids with a flash point below 60 °C.

- A 55-gallon drum with placarding that indicated the drum contained methylene chloride, a known U-listed waste (U080).

In May 2017, the Environmental Protection Agency (EPA) observed approximately 103 drums in the "heavy" area. The volume of seven drums was documented, ranging from two inches to over three inches. Labels from these drums indicated the drums contained hazardous waste.

The storing of non-empty drums in the "heavy" area is a routine practice based on the St Francis Inspections and information provided by facility representatives. A search of the department's database confirms the Pennsylvania Ave, St Francis Site / CLCM / Greif do not possess a hazardous waste storage license.

TRANSPORT HAZARDOUS WASTE WITHOUT A LICENSE (MASD)

3. **Section 291.23(1), Wis. Stats. states no person may transport hazardous waste without a license issued under this section.**

   Section NR 663.13(b), Wis. Adm. Code states each location at which a person transporting hazardous waste bases transport vehicles shall be licensed as a separate transportation service. An application form and fee for each transportation service shall be submitted to the regional office of the department in the region where the transportation service is located.

Semi-trailers are owned and operated by MASD, delivering containers to CLCM's Pennsylvania Ave, St Francis Site directly from customers. Ninety percent of the containers that arrive to the Pennsylvania Ave, St Francis site come directly from the customer. From CLCM's Pennsylvania Ave, St Francis Site, totes are transported by MASD to CLCM's Cornell St, Milwaukee Site. Semi-trailers are known to transport non empty drums and totes, some of which contain hazardous waste. Based on the March CEI, the department observed over 40 drums / totes in the Pennsylvania Ave, St Francis Site "heavy" area. Numerous containers were identified as holding hazardous waste.

A search of the department's database confirms the Pennsylvania Ave, St Francis / MASD do not possess a hazardous waste transportation license.

Chicago Rd, Oak Creek Site:

STORAGE OF HAZARDOUS WASTE WITHOUT A LICENSE (CLCM / Greif)

4. **Section 291.25(2)(b), Wis. Stats. states no person may operate a hazardous waste facility without an interim or operating license issued under this section.**

   Section NR 670.001(3), Wis. Adm. Code states s. 291.25(2), Wis. Stats. states a license is required for the operation of a treatment, storage or disposal facility where any hazardous waste identified or listed in ch. NR 661, Wis. Adm. Code is managed.

During the Oak Creek Inspections, the department learned semitrailer loads are temporarily staged for up to 30 days, until there is a need for a specific type of drum. When a drum type is needed, the semitrailer is brought

from the staging area to the sorting dock. As the semitrailer is unloaded by hand, drums that obviously contain material, by sight and feel, are set aside. These drums are classified as "heavies" and a reject sticker is placed on them. The "heavies" are tracked by CLCM and have been reported to stay at the site awaiting customer pick-up for a period of time.

During the March CEI, the department observed over 100 steel drums in the "heavy" area. A facility representative stated the drums needed to be returned to the customer because they were not "empty". Of the drums in the "heavy" area, the department identified containers as holding hazardous waste:

- Numerous 55-gallon steel drums with labeling indicating the drums contain a class 3 flammable liquid. Class 3 flammable liquids have a flash point at or below 140 °F (60 °C). The department considers these drums to contain a hazardous waste. Wastes that are hazardous due to the ignitability characteristic include liquids with a flash point below 60 °C.

In May 2017, EPA observed drums in the "heavy" area. The volume of three drums was documented, ranging from 1.25 inches to 1.5 inches.

The storing of non-empty drums in the "heavy" area is a routine practice based on the Oak Creek Inspections and information provided by facility representatives. A search of the department's database confirms the Chicago Rd, Oak Creek Site / CLCM / Greif do not possess a hazardous waste storage license.

TREATMENT OF HAZARDOUS WASTE WITHOUT A LICENSE (CLCM / Greif)

5. **Section 291.25(2)(b), Wis. Stats. states no person may operate a hazardous waste facility without an interim or operating license issued under this section.**

   Section NR 670.001(3), Wis. Adm. Code states s. 291.25(2), Wis. Stats. requires a license for the operation of a treatment, storage or disposal facility where any hazardous waste identified or listed in ch. NR 661, Wis. Adm. Code is managed.

During the Oak Creek Inspections, the department learned the Chicago Rd, Oak Creek Site is capable of reconditioning up to 2,000 steel drums per day, which reportedly typically contain residual non water-soluble wastes. CLCM receives and sorts the drums by sight and feel. Open top drums that do not feel "heavy" are placed on the processing line, destined for incineration. The incinerator burns off residual material from inside the drum. Facility representatives stated if a drum contains less than an inch of material, the drum will be placed on the incinerator line. Labeling on drums indicate the drums contain hazardous and/or nonhazardous waste. Liquid-like waste exits the drum within several seconds of being inverted. The amount of material released can vary, from several ounces up to 1.72 gallons. The chain will carry waste material into the incinerator.

During the February 24, 2017 site visit, department staff observed a 55-gallon drum on the conveyor line that contained a white liquid with a strong solvent odor. This drum had approximately an inch of the white liquid.

During the March 15, 2017 CEI, department staff observed drums that, when inverted on the incineration line, had liquid leave the container within several seconds of being inverted. Many drums waiting to be treated had Class 3 flammable liquid, D001, F003, and F005 labels on them. These drums contained flowable material in them.

In May 2017, EPA selected drums from a truck trailer backed up to the furnace dock, from the conveyor leading to the furnace, and from the furnace dock area. The volume of these eight drums was documented, ranging from .25 inches to a full drum.

Based on the standard operating procedure for identifying non RCRA empty drums, provided by the facility, and observations, the department believes the Chicago Rd, Oak Creek Site receives non RCRA empty drums that when inverted release waste materials. A search of the department's database confirms the Chicago Rd, Oak Creek Site / CLCM / Greif do not possess a hazardous waste treatment license.

TRANSPORT HAZARDOUS WASTE WITHOUT A LICENSE (MASD)

6. **Section 291.23(1), Wis. Stats. states no person may transport hazardous waste without a license issued under this section.**

   Section NR 663.13(b), Wis. Adm. Code states each location at which a person transporting hazardous waste bases transport vehicles shall be licensed as a separate transportation service. An application form and fee for each transportation service shall be submitted to the regional office of the department in the region where the transportation service is located.

Semi-trailers are owned and operated by MASD, delivering containers to CLCM's Chicago Rd, Oak Creek Site. From CLCM's Chicago Rd, Oak Creek Site, poly drums are transported by MASD to CLCM's Pennsylvania Ave, St Francis Site, and totes to its Cornell St, Milwaukee Site. These semi-trailers are known to transport non empty drums, some of which contain hazardous waste. Based on the March CEI, the department observed over 100 steel drums in the Chicago Rd, Oak Creek Site "heavy" area. Numerous drums were identified by label as holding hazardous waste.

A search of the department's database confirms the Chicago Rd, Oak Creek Site / MASD do not possess a hazardous waste transportation license.

LAND DISPOSAL RESTRICTIONS (CLCM / Greif)

7. **Section NR 668.07(1)(a), Wis. Adm. Code states a generator of hazardous waste shall determine if the hazardous waste meets the treatment standards in ss. NR 668.40, 668.45, or 668.49, Wis. Adm. Code or if the hazardous waste shall be treated before land disposal. This determination shall be made by testing the waste or using knowledge of the waste.**

The Chicago Rd, Oak Creek Site receives non-empty drums and when inverted onto the incinerator line, those drums release waste materials within several seconds of being inverted. This constitutes a point of generation under RCRA.

During the March 15, 2017 CEI, the department observed one 55-gallon drum labeled as F003 and F005 (methyl isobutyl ketone and acetone paint solvents used by the customer – hazardous waste). The chain on the incinerator drags these "F" listed hazardous wastes into the burner, which is then thermally treated (i.e. burned). The ash from the incinerator is taken offsite by Advanced Disposal to the Muskego Landfill, a subtitle D Landfill (not a hazardous waste landfill).

CLCM / Greif have not properly characterized the incinerator ash prior to disposal.

ADDITIONAL DISCUSSION ITEMS for all facilities:

- Cornell St, Milwaukee Site – Characterize each individual waste collection tote; water added to totes containing residual hazardous waste material (totes are not considered RCRA empty if all of the waste had not been removed using practices commonly employed to remove the materials from the tote. In addition, any "residue" removed from a tote would be subject to hazardous waste rules).
- Pennsylvania Ave, St Francis Site – Representative sampling of sludge.
- Chicago Rd, Oak Creek Site - Discrete analysis for bag house dust, incinerator ash, and shot blast debris.
- All sites – Universal waste containers require proper labeling and dates.

We have scheduled the following Enforcement Conference to discuss this matter in more detail:

Conference Date:	Wednesday August 9, 2017
Conference Time:	1:30 p.m.
Location:	DNR Milwaukee Service Center 2300 N Dr Martin Luther King Jr Drive, Milwaukee, WI

We request you attend the Enforcement Conference as it is an important opportunity to discuss the circumstances surrounding the alleged violations and to learn your perspective on this matter. Please note that in an effort to encourage a candid and productive conversation, attendance is limited to you, your legal counsel, and others with the technical expertise necessary to understand, evaluate and correct the violations.

The department's enforcement decision will be based upon available information if you do not attend the Enforcement Conference.

Please be advised violations of ch. 291, Wis. Stats., and chs. NR 663, 668, and 670, Wis. Adm. Code are enforced through s. 291.97(1), Wis. Stats. and may be referred to the Department of Justice to obtain court ordered compliance and penalties of up to $25,000 for each day of violation.

If you have questions, please contact me at (920) 360-1938.

Sincerely,

Anne Van Grinsven

Anne Van Grinsven
Environmental Enforcement Specialist

Enclosures – Enforcement Conference Information Sheet
March 15, 2017 Inspection – Chicago Rd, Oak Creek Site
March 22, 2017 Inspections – Pennsylvania Ave, St Francis Site; Cornell St, Milwaukee Site

cc: Cathy Baerwald – DNR
Mike Ellenbecker – DNR
Gary Victorine – Chief, RCRA Branch, EPA Region; 577 Jackson Blvd, Chicago, IL 60604
Kevin Meyer – Plant Manager (Cornell St Site and Chicago Rd Site), CLCM; 2300 W Cornell Street, Milwaukee, WI 53209
Mark Furgason – Plant Manager, CLCM; 3950 S Pennsylvania Ave, St. Francis, WI 53235
Linda Benfield – Foley & Lardner, 777 East Wisconsin Ave, Milwaukee, WI 53202-5306
Ole Rosgaard, VP – Greif, Inc, 366 Greif Parkway, Delaware, Ohio 43015

Environmental Enforcement Conference

An Enforcement Conference (EC) is a meeting between Department of Natural Resources (Department) staff and representatives of a person or business that the Department believes has violated an environmental law. The Department issues a Notice of Violation (NOV) when it has reason to believe that a violation of a permit condition, administrative rule or statutory requirement has occurred. The NOV either offers or schedules an EC.

Why Should I Attend?
The EC is an important opportunity to discuss the Department's basis for the alleged violation(s) and learn more about what happened, why it may have happened, and any factors you believe the Department should consider, such as steps that have been or will be taken to stop the violation, correct any effects of the violation, and prevent violations from occurring in the future. It is also your opportunity to explain why you might disagree with the factual and legal conclusions underlying the NOV.

Historic data shows that most violations are resolved at the EC level, without the need for court ordered compliance and/or penalties. In situations where the significance of the violation warrants further enforcement action, your cooperative efforts to resolve the violation and prevent future violations will help minimize your legal and financial liability.

Who Should Attend the EC?
Department staff involved in the EC typically consists of an Environmental Enforcement Specialist and regulatory staff that are familiar with the issues identified in the NOV.

While not required, you may seek representation by legal counsel or the assistance of an environmental consultant to prepare for and/or attend the EC. The EC is most productive when all involved are well-prepared to discuss the allegations and any corrective actions that may be necessary.

To ensure a productive candid discussion, participation in the EC is limited to the person or business involved and others with the legal or technical expertise necessary to understand, evaluate, mitigate and correct the violation. The EC is not an open meeting under state law and the Department will limit participation to those directly involved in the resolution of the matter.

What Happens if I don't Attend the EC?
If a party is unable to attend the EC, they should immediately contact the Environmental Enforcement Specialist at the phone number in the NOV to reschedule. When a party refuses to attend the EC and provides no further information to the Department, the Department's enforcement decision will be based upon available information.

What Happens Following the EC?
The EC is part of the Department's stepped enforcement process. At the EC, Department staff will explain the process and options available to address the alleged violation. Generally, the options range from closing the matter with no further action to referral to the Wisconsin Department of Justice (DOJ) or to U.S. EPA, for further enforcement action. In limited circumstances, the Department can issue citations, which are handled in local court similar to traffic offenses. If a case is referred to DOJ, the DOJ may initiate an action in court on behalf of the State. The State typically asks the Court to impose financial penalties and order completion of any necessary corrective actions. In most of the Department's cases, a cooperative return to compliance with any necessary restoration results in close out of the case. At close out, the Department will send a letter advising of no further enforcement action.

State of Wisconsin
Department of Natural Resources

Form 4430-5 (R. 03/06)

COMPLIANCE MONITORING AND EVALUATION FORM

A. GENERAL INFORMATION

FIST SEQ #: 58985

Facility Name (current)	FID #	EPA ID #	Case #	Complaint #
CONTAINER LIFE CYCLE MANAGEMENT-OAK CREEK	241021220	WID045953189	58985	

Street/Location	Notification Status
8570 S CHICAGO RD	HW GENERATOR - SMALL

City	Zip Code	County	Type of Contact	Contact Date/Time
OAK CREEK	53154-3599	MILWAUKEE	FIELD	03/15/2017 00:00

Contact Name/Phone Number		Staff Assigned to Site	Case Close Out Date
SCOTT SWOSINSKI, VP/GM	(414) 762-1114	BAERWALD, CATHERINE	

B. FACILITY INSPECTED AS

Inspection Type
HW TSD

C. NOTIFICATION CHANGE

Date processed SHWIMS_____, EPA Data System_____

Status Change: Field Verified Status Is _____

Name Change: Former Name _____

D. ACTIVITY TYPES

Lic/RU/RA	Staff Person	Lead Program	Activity Type
	ELLENBECKER, MICHAEL J	HAZARDOUS WASTE	OTHER
Inspected as an unlicensed TSD.			
	BAERWALD, CATHERINE M	HAZARDOUS WASTE	ASSIST LEAD STAFF

E. ACTIONS AND VIOLATIONS

Action Date	Action Type	Close Date	SNC	Comments
	NON			

Viol. Type	Action Type	Violation Discovery Date	Action Date	Response Due Date	Actual Compliance Date	Viol. Status Code	Code or Statute Citation	Code or Statute Description
	NON	03/15/2017				X	664.0013(1)(a)	Detailed chemical and physical analysis
	NON	03/15/2017				X	668.07(1)	Correct LDR notification/certification
	NON	03/15/2017				X	668.50(1)(b)	Each container marked with start date
	NON	03/15/2017				X	664.0073(2)	Operating record
	NON	03/15/2017				X	664.0075	Annual reports to Dept by March 1
	NON	03/15/2017				X	664.0035	Adequate aisle space
	NON	03/15/2017				X	664.0014(2)	Preventing entry
	NON	03/15/2017				X	664.0014(3)	Signs posted
	NON	03/15/2017				X	664.0015(1)	Inspections conducted frequently enough
	NON	03/15/2017				X	664.0016(4)	Training is documented
	NON	03/15/2017				X	664.0173(1)	Containers kept closed
	NON	03/15/2017				X	664.0174	Container storage areas inspected weekly
	NON	03/15/2017				X	664.0175(2)(a)	Containment system integrity
	NON	03/15/2017				X	664.0143	Proof mechanism for closure
	NON	03/15/2017				X	664.1086(3)(d)	664.1086(3)(d) / 664.1086(3)(d)
	NON	03/15/2017				X	673.14	Labeled or marked "Waste" or "Used"
	NON	03/15/2017				X	673.15(3)	Length of accumulation time
	NON	03/15/2017				X	662.040(3)	Records of waste determinations 3 years
	NON	03/15/2017				X	664.0073(2)(i)	Reduce the volume and toxicity

Region Signature(s) BAERWALD, CATHERINE

Date Signed

Viol. Type	Action Type	Violation Discovery Date	Action Date	Response Due Date	Actual Compliance Date	Viol. Status Code	Code or Statute Citation	Code or Statute Description
	NON	03/15/2017				X	664.0076	Unmanifested waste report within 15 days
	NON	03/15/2017				X	662.011(3)	Waste determination been made correctly
	NON	03/15/2017				X	664.0072(4)(a)	Impossible to forward
	NON	03/15/2017				X	664.0073(2)(i)	Reduce the volume and toxicity
	NON	03/15/2017				X	670.001(3)	No HW storage license
	NON	[illegible]				X	[illegible]	No HW transportation license
	NON	03/15/2017				X	664.0072(4)(a)	No manifest from the generator
	NON	03/15/2017				X	664.0051	Written contingency plan
	NON	03/15/2017				X	662.011	Hazardous waste determination
	NON	03/15/2017				X	670.001(3)	No HW treatment license

F. CASE CONTACTS

G. COMMENTS

On site with Kathy Baerwald

Narrative:

CASE ACTIVITY REPORT
Form 4100-182 9-99State of Wisconsin
Department of Natural Resources

Case Number

58985
Case Title

Container Life Cycle Management, LLC

Activity

Oak Creek/Chicago Road Facility - Compliance Evaluation Inspection Narrative
Date of Activity

March 15, 2017

EPA ID#: WID045953189
FID#: 241021220
Address: 8570 S. Chicago Road, Oak Creek, WI

On March 15, 2017 at approximately 8:57 a.m., Waste Management Specialist Catherine Baerwald arrived at Container Life Cycle Management (CLCM) located at 8570 S. Chicago Road in Oak Creek. Baerwald was there to assist on a large quantity generator (LQG) hazardous waste compliance inspection with Mike Ellenbecker, DNR Hazardous Waste Program Coordinator ((it was later determined that a treatment, storage, and disposal [TSD] facility inspection form was more applicable to CLCM than a LQG inspection form). Ellenbecker informed the facility that morning an inspection would be performed. Joining Baerwald and Ellenbecker for the inspection was Linda Benfield, Foley & Lardner LLP, Steel Johns, Environmental Health & Safety Manager, Grief, Inc. and Kevin Meyer, Operations Manager for the CLCM-Oak Creek facility.

Baerwald and Ellenbecker met with facility personnel for an opening conference in a nearby meeting room. Ellenbecker stated the reason for the inspection was because of concern with the "heavy" drum area and the potential for the facility to be an unlicensed storage facility. Heavy drums are drums the facility deems are not RCRA empty; the RCRA empty exemption does not apply if material can be removed from the drums. If the drum material is going into the burner, the facility may be an unlicensed hazardous waste treatment facility. There was extensive conversation on RCRA empty drums and how they are regulated. A background of Oak Creek's operation was given to Ellenbecker and Baerwald. Drums from different companies are delivered to the facility. The drums are on trailers that were stationed at the distributing company's location until ready to be shipped to CLCM. If so desired, reconditioned drums will be shipped back to the original company. Sometimes customers will use their own transportation to deliver drums to CLCM-Oak Creek; other times, the drums are delivered by Mid America Steel Drum. The Oak Creek facility refurbishes steel drums. If poly drums or IBC totes arrive at CLCM-Oak Creek, the poly drums are transported to the CLCM-St. Francis facility and the IBC totes are transported to the CLCM Cornell Street facility. Meyer stated that approximately 10 to 15 percent of drums are shipped between the locations. CLCM refurbishes drums and totes for companies primarily in Wisconsin and Illinois. Trailers that are unloaded right away are called a "live unload"; if they are delivered by a carrier or self-delivered, the trailers are "live" unloaded. The facility receives approximately one load by a carrier a day. If drums are deemed "heavy", they are put into a designated area, the original company is called and the information is written on a white board and into a spreadsheet. Some drums are left on trailers and the facility's goal is to unload them in 30 days. The trailers will be stored across the street in a parking lot on the south side of the facility. The number of drums unloaded by the facility is a little less than 10 loads a day according to Meyer. The trailers that the facility receives are not always fully loaded.

The facility accepts drums that once contained product and some that previously held waste material. Meyer stated that the ratio is 75% product-containing drums to 25% waste-containing drums. The drums will be received on two different loading docks. One dock is for closed-head steel drums that need the lids removed or cut off. Another loading dock is for open-head drums that have a bolt ring that secures the top on the drum. The open-head loading dock is located by the burner area. The closed-head loading dock in located on the west side of the facility. The loading docks are also called the sorting areas because this is where the determination is made whether a drum is heavy. The closed-head drums will go on a conveyor to a "cutting room" where the lids will be removed. The open-head drums have the bung ring loosened, the lid is removed, and then will go on a conveyor to the burner. The drums can be made into closed-head or open-head after reconditioned; Meyer stated that 95% of drums become open headed.

All drums will go into the burner or reclamation furnace. The drums are tipped upside down before going into the furnace. After the burner, the drums are sent to a shot blaster. The blaster is an unmanned operation and consists of a steel shot. Seven barrels are allowed in the blaster machine, but only one will get blasted at a time. The blasting device is located in the center of the machine unit and will rotate the drum while blasting on the inside, outside, and end of the drum. This step cleans the drum so it can be coated. The drums are then sent to a forming area where the drums are made round again. The facility calls this an expansion system and it also consists of a quality check of the cleaning process, a search for visible holes, and scanning for damage areas. The drum is inspected depending on how the customer will be using it. Meyer stated that if the drums don't pass the quality check it will be blasted again. Approximately 67 out of 2000 drums will not pass the quality check and need to go back in the blaster. Three percent of those drums will fail the quality check a second time. All drums that pass the inspection process go for painting and onto a truck to be shipped to customers. The shipping dock is unable to hold all outgoing drums, so they are stored in trailers on the west side of the property. The drums that fail will be scrapped.

The painting area uses water-based paint for outside coating and solvent-based paints for inside the drums and left over colors are used for the bottom of the drums. If there is a color change, it will push out the old color in the paint gun line. The old color will drain into a bucket and then into a single pump for the bottom of the drum painting. Meyer stated that the only solvent used is acetone for cleaning the tips of the paint line. The tip is dipped into the acetone and a short brush will scrape off any residue.

Another waste generated by the facility is silicone that is drained from the customer's drum upon arrival. The facility removes silicone because the chemical will create a film that will cover the flame detecting lens in the furnace system. Meyer stated that it takes a couple weeks to fill a 55 gallon drum with the drained silicone; CLCM Oak Creek generates one or two drums of silicone a month.

Ash is collected along the conveyor inside the burner unit and placed in a metal box along the side of the furnace. Ash from the burner, bag house dust, and debris from the shot blast area are all comingled and stored in smaller dumpsters. Ellenbecker asked Meyer how much ash and bag house dust is generated each month and Meyer stated he was unaware of the amounts. Sampling of the ash, bag house dust, and shot blast was discussed and Ellenbecker explained that representative samples were needed of the individual waste streams and not the comingled wastes. An explanation of incremental sampling (samples should not just be extracted from the top of the waste and sampling should be taken throughout the month) was given to Meyer, Johns, and Benfield. Meyer said samples were just taken at the facility and it was conducted throughout a week's time. Ellenbecker reiterated that a month's worth of samples would be more accurate for the waste streams and ideally would include at least thirty grabs of the sample. The facility is presently determining the waste as non-hazardous.

A "chime" is put in to seal the drum edges and make sure loose shot blast material that is stuck will not escape the gaps. This is a one-time application with no waste of material.

A facility tour began where the heavy drum area is located. Department staff took pictures and wore hard hats, vests, safety glasses, ear protection and steel toe shoes. In this area, over 100 drums were shrink-wrapped in three and four in a bunch. Some drums had "flammable" stickers and labels of different color paints, "M-P-A", "methyl acrylate", and solvent -based material. Also, there were drums that had "Hazardous Waste" labels on them. Many drums had "reject" stickers on them that included a date. Dates observed on the labels read 1/24/17, 2/28/17, 3/8/17 and 3/13/17. A few of the drums had open bungs. Ellenbecker mentioned that the bungs should be closed. Pictures were taken.

Next on the inspection was the area where employees unload the drums before they are put on the conveyor that goes to the cutting room. Drums were being actively unloaded at the time of the inspection. No heavies were observed in the area.

The group walked around the facility and passed where two small dumpsters of comingled ash material was located. Photos were taken.

Next on the inspection was the burner area located on the eastern side of the facility. The dock employees were actively unloading drums and the burner system was running. Pictures were taken. Drums are tipped over before going into the burner area. Liquid was observed coming out of some drums onto the conveyor chain. The liquids on the conveyor chain end up in the burner. The employees by the burner were using a water hose to spray the area where the drums were being tipped. Ellenbecker asked why water was being used and Meyer stated it was to help the conveyer chain keep cool and to reduce ignitability. Two conveyors lines were filled with drums. One line came from the cutting room and one was from the open-ended drums that are unloaded in that area. Both lines had drums with the lids removed. These lids were placed on top of the drum. Some of these lids had open bungs. A number of drums had "flammable" labels and disclosed that they once contained paint material. Other drums had labels that indicated they held primer and lacquer. Ellenbecker looked into some of the drums that were labeled as "flammable" and observed flowable material lying in the bottom in some of these drums, which meant that these drums were not RCRA empty.

The group walked into the facility and went to the cutting room. The conveyor was not running and no drums were actively cut for lid removal. Drums were observed with "flammable" labels and "hazardous waste" stickers. The stickers read "waste flammable liquids", "acetone and petroleum distillates" "D001" on one drum and had wording of "D001, F003, and F005, methyl isobutyl ketone, and acetone" on a different drum. Some of the drums had product labels of Epotuf, Byketol, and the words "coatings". Photos were taken. The group went to the where the plant operations was occurring and observed the shot blast, forming, and painting area.

For the record review, the group walked back to the office area. Ellenbecker asked about used oil generation. Used oil is removed from compressors and used as a lubricant in the cutting room. Drums of used oil were observed during the inspection, but are not disposed offsite since the company reuses the oil elsewhere in the facility. Meyer and Johns clarified there are two unloading areas, an open drum and closed drum dock, and all the heavies are consolidated into the one area. Discussion took place on how heavy drums were tracked. Meyer left the room and returned with a log sheet that held information on the number of drums and date they were removed by the company. Ellenbecker asked about the drums on-site. Meyer exited the room and came back with a white board that showed the names of companies, how many heavies and the date the drums were received. Baerwald asked if the facility followed up to contact the companies since some of the heavies had dates from January. Meyer stated that he believed this was the case and was not sure if the dating on the white board was when the drums were delivered or when they were processed off the trailers. Heavies are determined by both feel and sight and then written on a sheet, transferred to the white board, and logged into the computer when picked up by the original company.

Ellenbecker explained that there are concerns that some of the heavy drums are flammable and that hazardous waste is being received at the facility without a license. Johns stated that the drums contained product; the facility contacts the company and doesn't accept waste. Ellenbecker explained the determination of waste is when it is being disposed, even if it is in its original product state. There is also concern with the heavy drums with the bungs off, especially drums that may contain water reactive contents, since the heavy area is located outside. Aisle space and weekly inspections would be needed and the tracking system of drums would need more data, especially for hazardous waste drums. Ellenbecker stated that transporters may also need to be a licensed hazardous waste transporter. The burner may be burning hazardous waste because of the drums containing flammable liquids. Ellenbecker clarified that the term RCRA empty applies to when it is in a drum, once a waste leaves a drum the exemption no longer applies. Because of this, CLCM Oak Creek may be in a large quantity generator status. CLCM recently made all three locations in the Milwaukee area small quantity generators. Johns stated they wanted to cover any possibility of hazardous waste generation. The Oak Creek location employs 34 people in the production area, not including the office personnel. The crews that work in the outside areas are always the same employees, while inside the facility personnel can move to different jobs.

personnel can move to different jobs.

Ellenbecker reviewed the LQG checklist. The company had not manifested since 2004 and did not have any land disposal restriction documents on-site. No annual reports were filed since they claimed to be a non-generator in 2009. Ellenbecker asked about preparedness and prevention. The company uses mobile radios and has a fire suppression system. The facility has fire extinguishers, two safety showers, spill control equipment consisting of carts, and multiple eyewash systems that are operational. The fire department inspects the location twice a year and the local hospital conducts an annual site review. The facility has an agreement with emergency contractors and equipment suppliers. Johns and Meyer stated that it had a contingency plan and Benfield will provide a copy with requested other documentation. Training was discussed and Meyer described a program in place where a different employee every day will talk about three topics that that person is committed to and will put into place. Meyer stated that he came in to the facility one day on a weekend when maintenance work was being conducted and the employees were taking part in the activity by themselves. The program is called CBS or Commitment Based Safety. Johns also teaches monthly safety training. Ellenbecker asked about universal waste. Meyer left the room and returned with two buckets, one filled with used lamps and one with ballasts. The buckets were closed. The used lamp bucket was labeled "Universal Waste" but had no description of the contents. There was no date on the container. The other bucket had a label that read "Lamp Ballast Recycling Pail". No dates were on this container. Ellenbecker stated that contents of universal waste need to be written on the containers and dates or an inventory system of disposal would be required. Meyer explained that the location had a shipment of the universal waste removed recently and the facility uses Grainger for waste lamp disposal. Ellenbecker asked if there were any questions and mentioned that a list of what was needed from the facility will be sent to Benfield. Baerwald and Ellenbecker thanked Johns, Meyer, and Benfield for their time and left the facility at approximately 12:37 p.m.

Specialist Reporting

Catherine Baerwald-Waste Management Specialist-Senior
Date of Report

March 16, 2017
Exhibit Reference

TREATMENT & STORAGE FACILITY INSPECTION

This Inspection Form, used for the inspection of facilities having a hazardous waste license to store and/or treat hazardous waste, evaluates facility compliance with Wisconsin's Hazardous Waste Management Rules (chapter NR 660 - 679, Wis. Admin. Code).

Section 1: Waste Received from Off-Site

A. Each manifest is signed and dated to certify receipt. Non-RCRA empties (i.e., containers holding hazardous waste) are routinely received at the facility without a uniform hazardous waste manifest. Since a manifest is not used NA was selected 1.A - 1.H	NA	664.0071(1)(a)
B. Significant manifest discrepancies are noted, if applicable.	NA	664.0071(1)(b)2
C. A copy of the signed manifest is provided to the transporter.	NA	664.0071(1)(b)3
D. A copy of the signed manifest is sent to the generator within 30 days.	NA	664.0071(1)(b)4
E. A copy of the signed manifest is sent to the Department within 45 days.	NA	664.0071(1)(b)4
F. A copy of the signed manifest is retained on-site for at least three years.	NA	664.0071(1)(b)5
G. If a significant manifest discrepancy is noted, the facility attempts to reconcile the discrepancy with the generator or transporter.	NA	664.0072(3)
H. If there is no resolution within 15 days of receiving the waste, the facility immediately submits a letter to the Department describing the situation and a copy of the manifest.	NA	664.0072(3)

Section 2: Rejected Shipments of Waste or Excess Residue in Containers

A. Facility has rejected shipments of hazardous waste or received containers with residues exceeding quantity limits for empty containers. If No, go to Section 3. Faclity also process non-RCRA empties conatiners.	Y	
B. Facility consulted with the generator before forwarding the waste to another facility. Non-RCRA empties are only returned to the generator either by a courier or generator comes to pick up containers.	NA	664.0072(4)(a)
C. Facility returns the rejected waste or residue to the generator when they can not forward the waste to an alternate facility. During the site inspection on March 15, 2017, it was learned that all non-RCRA empty drums containing hazardous waste are returned to the generator. These non-RCRA empty drums can only be returned to the generator when it is impossible to locate an alternative facility that can receive the hazardous waste.	X	664.0072(4)(a)
D. Facility sends the waste to an alternate facility or the generator within 60 days of rejection or identifying the excess container residue. The facility does not use a manifest so 'NA' was selected.	NA	664.0072(4)(a)
E. Facility ensures the delivering transporter retains custody of the waste. The facility does not use a manifest so 'NA' was selected.	NA	664.0072(4)(b)
F. Facility provides secure, temporary custody of the waste before delivery to the first transporter. The facility does not use a manifest so 'NA' was selected.	NA	664.0072(4)(b)
G. Facility complies with the following if they use the original manifest to reject a full load to an alternate facility before the transporter leaves: **1. The facility forwards the rejected shipment to an alternate facility identified in Item 18b.** **2. The facility keeps one copy of the manifest for their records and gives the other copies to the transporter.** The facility does not use a manifest so 'NA' was selected.	NA	664.0072(5)(g)
H. Facility complies with the following if they use the original manifest to return a rejected shipment to the generator before the transporter leaves: **1. Complete items 18a and 18b, using the generator's information as the alternate facility.** **2. Retain one copy of the manifest and give the other copies to the transporter.** The facility does not use a manifest so 'NA' was selected.	NA	664.0072(6)(g)

TREATMENT & STORAGE FACILITY INSPECTION

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Section 2: Rejected Shipments of Waste or Excess Residue in Containers

I. Facility complies with the following if they return a rejected waste to the transporter or generator after the manifest has been signed and dated: **1. Amend their copy of the manifest by indicating the rejected waste or residue in the discrepancy space of the manifest.** **2. Copy the manifest tracking number from Item 4 of the new manifest to the discrepancy space of the amended manifest.** **3. Re-sign and date the manifest to certify the amended information.** **4. Retain a copy of the amended manifest for at least 3 years from the date of the amendment.** **5. Send a copy of the amended manifest to the transporter, generator, and department within 30 days.** The facility does not use a manifest so 'NA' was selected.	NA	664.0072(7)
J. Facility complies with the following for other rejected waste or residues sent to an alternate facility: **1. Prepare a new manifest according to the appendix in 40 CFR part 262.** **2. Write the generator's EPA ID #, name and address on the manifest in Items 1 and 5.** **3. Write the alternate designated facility and EPA ID # in Item 8.** **4. Copy the manifest tracking number in Item 4 of the old manifest to the special handling block in Item 14 and indicate the shipment is a residue or rejected waste.** **5. Copy the manifest tracking number in Item 4 of the new manifest to the manifest reference number in Item 18a of the old manifest.** **6. Write the DOT description in Item 9, including container types, quantity and volume of waste.** **7. Sign the certification in Item 15 as the offerer of the shipment.** The facility does not use a manifest so 'NA' was selected.	NA	664.0072(5)
K. Facility complies with the following for other rejected waste or residues sent back to generator: **1. Prepare a new manifest according to the appendix in 40 CFR part 262.** **2. Write the facility's EPA ID# in Item 1 and the generator's name and address in Item 5 of the new manifest.** **3. Write the name and EPA ID# of the initial generator as the designated facility in Item 8.** **4. Copy the manifest tracking number in Item 4 of the old manifest to the special handling block in Item 14 of the new manifest and indicate the shipment as a residue or rejected waste.** **5. Copy the manifest tracking number in Item 4 of the new manifest to the manifest reference line in the discrepancy block of the old manifest in Item 18a.** **6. Write the DOT description in Item 9, including container types, quantity and volume of waste.** **7. Sign the certification in Item 15 as the offerer of the shipment.** The facility does not use a manifest so 'NA' was selected.	NA	664.0072(6)

Section 3: Waste Analysis Requirements

A. Before treatment or storage, the facility obtains a detailed chemical and physical analysis of all incoming wastes. The site inspection on March 15, 2017, it was learned that MASD does not have a WAP.	X	664.0013(1)(a)
B. Waste samples are analyzed by laboratories certified or registered under NR 149. Provide lab names and certification numbers. Since the facaility does not have a WAP, 'NA" was slected for 3.B to 3.E.	NA	664.0013(1)(a)1
C. Waste analysis is repeated when EITHER of the following occurs: **1. The process generating the waste has changed.** **2. The shipment received does not match the waste designated on the manifest.**	NA	664.0013(1)(c)
D. Facility follows the stated procedures to inspect and, if necessary, analyze each incoming waste shipment to determine if the incoming waste matches the waste specified on the manifest.	NA	664.0013(3)
E. Facility follows their written waste analysis plan by performing ALL of the following: **1. Test the waste for the stated parameters.** **2. Use the stated test methods for each of the parameters.** **3. Use the desiginated sampling methods to obtain representative samples.** **4. Review or repeat the initial analysis according to stated frequencies.** **5. For off-site facilities, maintain waste analysis records supplied by generators.**	NA	664.0013(2)

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Section 4: Waste Generated On-Site and Waste Shipments

A. A hazardous waste determination has been made on each solid waste generated. The site inspection on March 15, 2017, showed that MASD has not made a hazardous waste determinations or has made an in correct hazardous waste determinations for the following waste streams: a. Waste generated when containers are inverted prior to entering the burner. Some of the drums, when inverted, release wastes within several seconds. This constitutes a point of generation under RCRA. The amount of waste released can vary, but likely ranges from several ounces to 1.72 gallons (approximate maximum volume for a 55-gallon container with 1" of waste remaining). The labeling on some of these drums indicated that the waste would be a hazardous waste for ignitability (D001). b. Ash generated from the burner. Some of the drums, when inverted, release wastes within several seconds. This constitutes a point of generation under RCRA. The amount of waste released can vary, but likely ranges from several ounces to 1.72 gallons (approximate maximum volume for a 55-gallon container with 1" of waste remaining). Based on the results of table 1, which shows that over 20% of the hazardous waste likely to be found in containers are listed hazardous waste, and the nearly 2,000 drums sent through the burner nearly every operating day, it is statistically improbable that none of the waste generated from when the drum is inverted in not a listed hazardous waste for toxicity. The chain on the burner drags these listed hazardous wastes into the burner, which are then burned creating an ash. By the derived from rule (s. NR 661.03(4)(b) WAC), the ash generated by the burner is a listed hazardous waste. Note that MASD has identified the ash in the burner as a nonhazardous waste, which is disposed of in a subtitle D landfill.	X	662.011
B. Waste samples are analyzed by laboratories certified or registered under NR 149. Provide lab names and certification numbers.	NI	662.011(3)(a)
C. Waste determinations are made correctly, considering the listed waste definitions and the characteristics of the waste, in light of the materials or processes used. See 4.A	X	662.011(3)
D. Records of all waste determinations are kept on-site for at least 3 years from the date the waste was last sent to a storage, treatment or disposal facility. During the site inspection on March 15, 2017, MASD was unable or unwilling to produce records showing how representative sampling was conducted on the ash from the burner, the bag house dust, the shot blast debris, and the waste generated when containers are inverted prior to entering the burner.	X	662.040(3)
E. A manifest is initiated with all off-site shipments of hazardous waste. No hazardous waste has been manifested off-site for the l;ast 3 years. Based on this 'NA' was selected for 4.E to 4.R.	NA	662.020(1)
F. The manifest is used according to the instructions in the appendix to 40 CFR part 262.	NA	662.020(1)
G. The facility designated on the manifest is permitted or licensed to accept the waste.	NA	662.020(2)
H. For out-of-state shipments, a copy of the manifest is sent to the department within 30 days of receiving the signed copy from the designated facility.	NA	662.023(3)
I. Manifest continuation form, EPA form 8700-22A, is prepared according to the instructions in the appendix of 40 CFR part 262.	NA	662.020(1)
J. Copy of the manifest signed by the facility is retained until the signed copy from the designated facility is received.	NA	662.040(1)
K. Copy of each manifest is kept for at least three years from the date of shipment.	NA	662.040(1)
L. Transporter or TSD is contacted if the signed manifest is not received in 35 days.	NA	662.042(1)
M. Exception report is submitted to the Department if signed manifest is not received within 45 days.	NA	662.042(2)
N. Hazardous waste is packaged according to applicable DOT requirements before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.030
O. Hazardous waste is labeled according to applicable DOT requirements before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.031

TREATMENT & STORAGE FACILITY INSPECTION

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Section 4: Waste Generated On-Site and Waste Shipments

P. Hazardous waste is marked according to applicable DOT requirements before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.032(1)
Q. Containers of 119 gallons and less are marked with the "Hazardous Waste-Federal law prohibit improper disposal" label before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.032(2)
R. Placards are offered to the initial transporter.	NA	662.033

Section 5: Land Disposal Restrictions

A. Facility has determined if each waste is prohibited from land disposal by lab analysis or generator knowledge. The site inspection on March 15, 2017, showed that MASD sends the ash from the burner to a subtitle D landfill; however, this ash is a listed hazardous waste due to the derived from rule.	X	668.07(1)
B. Facility complies with the prohibition against dilution of wastes.	C	668.03
C. A one-time written notice is sent to each treatment, storage or disposal facility with the initial waste shipment. No LDR documents have been prepared for the last 3 years, becvause no hazardous waste was manifested off-site. Because of this 5.C to 5.H have been marked as 'NA'	NA	668.07(1)
D. A new notification is sent to the TSD and maintained in the generator file when the waste or receiving facility changes.	NA	668.07(1)
E. If the waste MEETS treatment standards, the LDR notice certifies the waste may be land disposed without further treatment.	NA	668.07(1)
F. If the waste EXCEEDS treatment standards, the LDR notice gives notification of appropriate treatment and application prohibitions.	NA	668.07(1)
G. Underlying hazardous constituents have been identified for characteristic wastes.	NA	668.09(1)
H. Generator has identified the treatment standards for the listed waste code, in lieu of the treatment standard for the characteristic waste code, when waste is both a listed and characteristic waste OR has identified the treatment standards for all applicable listed and characteristic waste codes.	NA	668.09(2)
I. Each container is clearly marked to identify its contents.	C	668.50(1)(b)
J. Each container is marked with the date on which each period of accumulation began. The site inspection on March 15, 2017, of the 'heavies' storage area and the drum burn line showed that the drums containing hazardous waste were not dated with the date the drum arrived at the facility.	X	668.50(1)(b)
K. The facility may store the wastes for up to one year unless the department can demonstrate that the storage was not solely for the purpose of accumulation of quantities of hazardous waste as are necessary to facilitate proper recovery, treatment or disposal.	NA	668.50(2)
L. If waste is stored for more than 1 year, the facility can prove that storage is necessary to facilitate proper recovery, treatment or disposal.	NA	668.50(3)

Section 6: Recordkeeping and Reporting

A. An operating record is maintained at the facility.	C	664.0073(1)

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Section 6: Recordkeeping and Reporting

B. The operating record contains ALL of the following information, as applicable: **1. Description and quantity of each waste received.** **2. Method and date of each wastes treatment, storage or disposal.** **3. Location and quantity of each hazardous waste within the facility.** **4. Records and results of the waste analysis performed.** **5. Summary reports and details of all incidents that required implementation of the contingency plan.** **6. Closure cost estimates and any changes that are made in these estimates.** **7. Other monitoring, analytical data and testing, as required.** **8. For off-site storage and treatment facilities, a copy of the LDR notice required by the generator or the owner/operator.** **9. For on-site storage and treatment facilities, the information contained in the LDR notice, except the manifest number, required by the generator or owner/operator.** The site inspection on March 15, 2017, showed that the facility operating record lacked the information identifed above.	X	664.0073(2)
C. Documents in the operating record are maintained until closure of the facility.	C	664.0073(2)
D. Annual reports covering facility activities during the previous calendar year are submitted to the Department by March 1 of the following year. A review of department records on March 28, 2017, showed that MASD's annual reports do not include hazardous waste that was received from off-site.	X	664.0075
E. Facility submitted an unmanifested waste report within 15 days if the facility received a waste from an off-site source without an accompanying manifest or shipping paper AND the waste is not excluded from manifest requirements due to VSQG status. The site inspection on March 15, 2017, showed that MASD receives from off-site non-RCRA empty drums containing hazardous waste without an accompanying uniform hazardous waste manifest.	X	664.0076
F. Annual reports and unmanifested waste reports are available for inspection. NA was selected because there are no annual reports.	NA	664.0074(1)

Section 7: Preparedness and Prevention

A. Facility is equipped with ALL of the following, unless the equipment is not necessary for the types of wastes handled: **1. Device to summon emergency assistance (e.g., telephone, 2 way radio).** **2. Internal communications and alarm systems.** **3. Portable fire extinguishers.** **4. Fire control equipment, including special extinguishing equipment.** **5. Spill control equipment.** **6. Decontamination equipment (e.g., eyewash, shower).** **7. Water at adequate volume and pressure to supply water spray systems.**	C	664.0032
B. Emergency equipment listed in Question 7.A is tested and maintained to assure its proper operation in an emergency.	C	664.0033
C. There is immediate access to internal or external alarms or an emergency communication device in hazardous waste handling areas.	C	664.0034
D. Facility has made ALL of the following arrangements with emergency organizations: **1. Primary and support roles have been defined if multiple police and fire departments could respond to an emergency.** **2. Police, fire and emergency response teams are familiar with the facility layout, hazards of the waste handled, places where personnel work, entrances and roads in the facility and possible evacuation routes.** **3. Agreements are made with emergency response contractors and equipment suppliers.** **4. Local hospitals are familiar with the properties of wastes handled and the types of injuries or illnesses that could result from an emergency.** Fire dept. on site 2x a year, Kenway is the emrgancy responder, clinic comes to site	C	664.0037
E. Aisle space is provided throughout the facility to allow for the unobstructed movement of personnel and all emergency equipment. The site inspection on March 15, 2017, showed inadequate aisle space, which obstructed the movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment for the area where the heavies are stored and for the hazardous wastes stored in the semitrailers.	X	664.0035

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Section 8: Contingency Plan

A. Facility has a written contingency plan that will be implemented immediately in the event of a fire, explosion or hazardous waste discharge. The site inspection on March 15, 2017, showed that the facility did not have a written contingency plan that meets the requirements of subchapter D of chapter NR 664 WAC.	X	664.0051
B. Facility amended a SPCC plan or other emergency plan so it sufficiently incorporates hazardous waste management provisions.	NA	664.0052(2)
C. Copies of the contingency plan and all revisions have been made available to police, fire, hospital and emergency response teams.	NA	664.0053(2)
D. Contingency plan was amended due to ANY of the following: **1. Facility license was revised.** **2. Contingency plan failed in an emergency.** **3. Changes in site design, construction, O&M, or other circumstances affect emergency response.** **4. Emergency coordinators changed.** **5. Emergency equipment changed.**	NA	664.0054
E. Contingency plan identifies an emergency coordinator who meets ALL of the following: **1. Available or on call to coordinate emergency response measures.** **2. Familiar with all aspects of site activities and the contingency plan.** **3. Has authority to commit the resources needed to carry out the contingency plan.**	NA	664.0055
F. Contingency plan includes ALL of the following: **1. Designation of the primary emergency coordinator, with alternates listed in the order of assuming responsibility.** **2. Name, address and phone number, office and home, for each emergency coordinator.** **3. Description of the arrangements agreed to by the police, fire, hospitals and emergency response teams to coordinate emergency services.** **4. Evacuation plan for personnel including signal(s) to be used in the event of evacuation and alternate routes.** **5. Actions facility personnel will take in response to a fire, explosion or hazardous waste discharge.** **6. List of emergency equipment at the facility including location, description, and capabilities of each item.**	NA	664.0052
G. Contingency plan requires the emergency coordinator to do ALL of the following in the event of a fire, explosion, or discharge of hazardous waste: **1. Activate internal alarms or communication systems.** **2. Notify appropriate authorities, if their help is needed.** **3. Identify the character, source, amount, and extent of discharged hazardous materials.** **4. Assess hazards to human health and the environment.** **5. If the incident threatens human health or the environment outside the facility, notify local authorities that evacuation may be necessary and notify the national response center (800-424-8802) and the division of emergency government (800-943-0003).** **6. Take all reasonable measures necessary to ensure fires, explosions and discharges do not occur, reoccur, or spread.** **7. Monitor for leaks, pressure buildup, gas generation or ruptures in valves, pipes, or other equipment if the facility stops operation.** **8. Provide for treating, storing, or disposing of recovered waste, contaminated soil, surface water, or other material.** **9. Ensure wastes that are incompatible with the released material are not treated, stored or disposed until cleanup is completed.** **10. Ensure that emergency equipment is clean and fit for use prior to resuming operations.** **11. Notify the department and appropriate state and local authorities before resuming operations.** **12. Submit an incident report to the department within 15 days.**	NA	664.0056

Section 9: Security and General Inspection Requirements

A. Facility has EITHER of the following to prevent the unknowing entry and minimize the unauthorized entry of persons or livestock onto active portions of the site: **1. 24-hour surveillance system (guards, facility personnel, or television).** **2. Artificial or natural barriers to control entry (fence around active portions of facility) AND a means to control entry (attendants, locked entrances or controlled roadway access).** The site inspection on March 15, 2017, showed the facility lacked a 24-hour surveillance system which continuously monitors and controls entry onto the active portion of the facility, or an artificial or natural barrier (e.g., a fence in good repair), which completely surrounds the active portion of the facility and also a means to control entry, at all times, through the gates or other entrances to the active portion of the facility (e.g., an attendant, television monitors, locked entrance or controlled roadway access to the facility).	X	664.0014(2)

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Section 9: Security and General Inspection Requirements

B. "Danger - Unauthorized Personnel Keep Out" signs are posted at entrances and other locations. The site inspection on March 15, 2017, showed the facility lacked signs with the legend, "Danger - Unauthorized Personnel Keep Out", posted at each entrance to the active portion of a facility, and at other locations, in sufficient numbers to be seen from any approach to this active portion.	X	664.0014(3)
C. Facility conducts inspections to determine if problems exist which could cause an environmental or human health hazard. The site inspection on March 15, 2017, showed that the facility does not have an inspection program for malfunctions and deterioration, operator errors and discharges, which may be causing, or may lead to, release of hazardous waste constituents to the environment or a threat to human health.	X	664.0015(1)
D. Inspections are conducted frequently enough to identify and correct problems before they harm human health or the environment. Since the facility is not in compliance with 9.C. 'NA' was selected for 9.D to 9.I.	NA	664.0015(1)
E. Facility is following a written inspection schedule for the following equipment: **1. Monitoring equipment.** **2. Safety and emergency equipment.** **3. Security devices.** **4. Operating and structural equipment.**	NA	664.0015(2)(a)
F. Facility looks for problems identified in the inspection schedule during their inspections.	NA	664.0015(2)(c)
G. Problems are remedied on a schedule that ensures they do not lead to environmental or human health hazards.	NA	664.0015(3)
H. Written inspection log is maintained at the facility for at least 3 years.	NA	664.0015(4)
I. Inspection logs include ALL of the following: **1. Date and time of inspection.** **2. Name of inspector.** **3. Notation of the observations made.** **4. Date and nature of repairs or remedial actions.**	NA	664.0015(4)

Section 10: Personnel Training Requirements

A. Facility has a program of classroom instruction or on-the-job training for personnel in hazardous waste management.	C	664.0016(1)(a)
B. Program is directed by a person trained in hazardous waste management procedures.	C	664.0016(1)(b)
C. Program teaches facility personnel hazardous waste management procedures relevant to the positions in which they are employed.	NA	664.0016(1)(b)
D. Training program ensures personnel are able to respond effectively to emergencies by familiarizing them with the following applicable items: **1. Contingency plan implementation.** **2. Procedures for using, inspecting, repairing, and replacing emergency and monitoring equipment.** **3. Key parameters for automatic waste feed cut-off systems.** **4. Communications and alarm systems.** **5. Response to fires or explosions.** **6. Response to groundwater contamination incidents.** **7. Shutdown of operations.**	NA	664.0016(1)(c)
E. New employees are trained within 6 months of their assignment.	C	664.0016(2)
F. Employees work in supervised positions until they complete the training.	C	664.0016(2)
G. Personnel take part in an annual review of the training.	C	664.0016(3)

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Section 10: Personnel Training Requirements

H. Facility keeps ALL of the following training documents: **1. Job title and the employee name for each position related to hazardous waste management.** **2. Job description of each of the above job titles.** **3. Description of the amount and type of introductory and continuing training that will be given to each employee.** **4. Records that required training has been given to each employee.** The site inspection on March 15, 2017, showed that the facility's training records do not include outlined above.	X	664.0016(4)
I. Training records are maintained until closure for current personnel and at least 3 years from the date the employee last worked at the facility.	NA	664.0016(5)

Section 11: Ignitable, Reactive or Incompatable Waste

A. Facility treats or stores ignitable, reactive or incompatible waste. If NO, go to Section 12.	Y	
B. Facility takes precautions to prevent accidental ignition or reaction in the following ways: **1. Separate and protect waste from sources of ignition or reaction.** **2. Confine smoking and open flame to specially designated locations.** **3. Conspicuously place "No Smoking" signs where there is a hazard from ignitable or reactive wastes.**	C	664.0017(1)
C. Facility treats, stores, or mixes ignitable, reactive, or incompatible wastes so that the waste does not result in any of the following: **1. Generate extreme heat or pressure, fire, or explosion, or violent reaction.** **2. Produce uncontrolled toxic mists, fumes, dust or gases in sufficient quantities to threaten human health.** **3. Produce uncontrolled flammable fumes or gases in sufficient quantities to pose a fire or explosion risk.** **4. Damage the structural integrity of the device or facility containing the waste.** **5. Otherwise threaten human health or the environment.**	C	664.0017(2)
D. Containers of ignitable or reactive waste are located at least 50 feet from the property line.	C	664.0176
E. Incompatible wastes are stored in separate containers unless the mixing will not generate extreme heat, fire, explosion, toxic gases or other dangers	C	664.0177(1)
F. Containers that previously held waste are washed before adding incompatible waste.	NA	664.0177(2)
G. Containers of incompatible wastes are separated or protected from each other by a physical barrier (dike, berm, wall or other device).	C	664.0177(3)

Section 12: Container Standards

A. Facility stores or treats hazardous waste in containers. If NO, go to Section 13.	Y	
B. If a container is leaking or in poor condition, the contents are transferred to another container in good condition.	C	664.0171
C. Containers are made or lined with materials that are compatible with the waste.	C	664.0172
D. Containers are kept closed, except when it is necessary to add or remove waste. The site inspection on March 15, 2017, showed that the closed headed drums containing hazardous waste that have been deheaded no longer meet the definition of a closed container.	X	664.0173(1)
E. Containers are opened, handled or stored to prevent ruptures or leaks.	C	664.0173(2)
F. Container storage areas are inspected weekly for leaks and deterioration. The site inspection on March 15, 2017, showed that the 'heavies' area and the semitrailers, which are areas where hazardous waste is stored, are not inspected on a weekly basis.	X	664.0174

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Section 12: Container Standards

G. Inspections of the container storage areas are documented in an inspection log. NA was seleteced since there are no inspections are conducted.	NA	664.0015(4)
H. Base of the containment system is free of cracks and sufficiently impervious to contain leaks. The site inspection on March 15, 2017, showed that the area used to store the hazardous waste heavies and the semitrailers are stored on gravel. Gravel is not imperious and therefor does not qualify as a containment system.	X	664.0175(2)(a)
I. Waste and accumulated precipitation are removed from the sump or collection area in a timely manner to prevent overflow of the collection system. NA was seleteced since there is no containment.	NA	664.0175(2)(e)

Section 13: Subchapter AA Standards for Process Vents

A. The facility conducts distillation, fractionation, thin-film evaporation, solvent extraction, air stripping operations or steam stripping operations in units managing hazardous waste. If NO, go to Section 14.	N	
B. The facility has determined that the process vents are not subject to subch. AA by making an initial determination that the time-weighted, annual average total organic concentration of the waste managed in the above units is <10 ppmw by direct measurement of the organic concentration of the waste calculated as an arithmetic mean from 4 grab samples OR by knowledge of the waste.	NA	664.1034(4)
C. If knowledge of the waste was used, the facility maintains ANY of the following: **1. Documentation showing no organic compounds are used in the process.** **2. Documentation showing that another identical process generates waste with < 10 ppmw total organic content.** **3. If based on prior analysis, documentation showing there has been no change to the process that would affect total organic concentration.** **4. Other similar documentation.**	NA	664.1034(4)
D. If the facility determined that the average total organic concentration is <10 ppmw, the determination has been made according to ALL of the following: **1. When the waste was first managed in the waste management unit or when the facility became subject to subch. AA.** **2. Annually thereafter for continuously generated waste.** **3. When there was a change in the waste managed or a change in the process generating or treating the waste.**	NA	664.1034(5)
E. The operating record includes the information used to determine that the time weighted, annual average total organic concentration managed in the waste management unit is <10 ppmw.	NA	664.1035(6)
F. The facility has determined they are not subject to subch. AA because they have certified that all process vents are equipped with air emission controls operating according to the process vent requirements in the Clean Air Act.	NA	664.1030(5)
G. All process vents are excluded from subch. AA requirements because the average total organic concentration is <10 ppmw or because the vents are equipped with air emission controls. If YES, go to Section 14.	NA	
H. The total organic emissions from all process vents subject to subch. AA have been reduced to EITHER of the following: **1. Below 3 lb/hr and 3.1 tons/yr.** **2. By 95 weight percent using a control device.**	NA	664.1032(1)
I. Vent emissions and emission reductions or total organic compound concentrations are achieved by add-on control devices that are based on engineering calculations or performance tests.	NA	664.1032(3)
J. When knowledge of the waste or process is used to determine if the process vent is subject to subch. AA standards, the operating log includes ALL of the following information which is based on engineering calculations or performance tests: **1. Vent emissions.** **2. Emission reduction rates.** **3. Total organic compound concentrations achieved by add-on control devices.**	NA	664.1035(6)
K. The facility uses a closed-vent system and control device to reduce total organic emissions. If YES, complete the inspection form, "TSD Subch. AA & BB Standards for Closed Vent Systems and Control Devices".	NA	

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Section 14: Subchapter BB Standards for Equipment Leaks

A. The facility operates any of the following equipment that contains or contacts hazardous wastes with organic concentrations >=10% by weight. If NO, go to Section 15. 1. Pumps in light liquid service. 2. Compressors. 3. Pressure relief devices in gas or vapor service. 4. Sampling connection systems. 5. Open-ended valves or lines. 6. Valves in gas or vapor service or in light liquid service. 7. Pumps or valves in heavy liquid service 8. Pressure relief devices in light liquid or heavy liquid service. 9. Flanges or other connectors.	N	
B. The equipment listed in Question 14.A is excluded from subch. BB requirements because it is in vacuum service and individually listed in the facility operating record by an identification number (NR 664.1064(7)(e)).	NA	664.1050(5)
C. The equipment listed in Question 14.A is excluded from subch. BB requirements because it operates < 300 hours per calendar year AND is identified, either by list or location (area or group), in the facility operating record.	NA	664.1050(6)
D. If the facility determines compliance with subch. BB by documenting compliance with the Clean Air Act requirements, the documentation is readily available as part of the operating record.	NA	664.1064(13)
E. The following information used to determine the applicability of the exclusions in Questions 14.A - 14.D is recorded in the operating log: 1. Analysis determining the design capacity of the hazardous waste management unit. 2. Statement listing the hazardous waste influent to and effluent from each hazardous waste management unit subject to subch. BB and an analysis determining whether these hazardous wastes are heavy liquids. 3. Up-to-date analysis and the supporting information used to determine whether or not equipment is subject to subch. BB.	NA	664.1064(11)
F. When knowledge of the nature of the hazardous waste stream or the process by which it was produced is used to determine the applicability of the exclusions, supporting documentation such as the following is recorded in the operating log: 1. Information that the production process does not use organic compounds. 2. The process is identical to a process at another facility where the total organic content was measured at <10% 3. The process has not changed to affect the total organic concentration of the waste.	NA	664.1064(11)
G. The operating log includes new determinations which are performed when changes could result in an increase in the total organic content of the waste in contact with equipment determined not to be subject to subch. BB requirements.	NA	664.1064(11)
H. All of the equipment listed in Question 14.A is excluded from additional subch. BB requirements. If NO, complete the TSD subch. BB inspection form.	NA	

Section 15: Subchapter CC Level 1 Standards for Containers

A. The facility manages hazardous waste in containers with EITHER of the following design capacities. If NO, go to Question 15.V (NR 664.1086(2)(a)). 1. Between 26 and 119 gallons. 2. Greater than 119 gallons that are not in light material service.	Y	
B. Containers are exempt from subch. CC because of ALL of the following (NR 664.1083(1), NR 664.1082(3)(a)): 1. The average VO concentration at the point of origination is <500 ppmw for all hazardous waste entering the container. 2. The initial determination of the average VO concentration for the waste stream was made before the material was placed in the container. 3. The initial determination is reviewed and updated at least once every 12 months. 4. A new waste determination is performed whenever changes to the source generating the waste stream likely causes the average VO concentration to increase to 500 ppmw. 5. The average VO concentration is determined by direct measurement or by knowledge. Note: See NR 665.1084(1)(c) for direct measurement procedures and NR 665.1084(1)(d) for using knowledge.	N	
C. For each waste determination, the date, time, and location of each waste sample collected are maintained in the facility records.	NI	664.1089(6)(a)

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Section 15: Subchapter CC Level 1 Standards for Containers

D. Containers are exempt from subch. CC because of EITHER of the following (NR 664.1082(3)): **1. The organic content of all waste entering the container has been reduced by an organic destruction or removal process described in NR 664.1082(3).** **2. The hazardous organic constituents of the waste placed in the container have been treated to meet LDR standards.**	**N**	
E. Containers are excluded from subch. CC because they are used to store or treat hazardous waste from organic peroxide manufacturing processes (NR 664.1080(4)). **Note: Certain records must be maintained. Refer to NR 664.1089(9) for more information.**	**NA**	
F. Containers are excluded from subch. CC because they are used solely to store or treat EITHER of the following (NR 664.1080(2)): **1. On-site remediation wastes generated through NR 700 or RCRA corrective action activities.** **2. Radioactive mixed wastes in accordance with NRC requirements.**	**N**	
G. Containers are excluded from subchapter CC because of BOTH of the following (NR 664.1080(2), NR 664.1089(10)): **1. They are equipped with air emission controls operated in accordance with the Clean Air Act requirements.** **2. Facility records include a certification of such by the owner or operator and the specific air program compliance requirements for the containers .**	**N**	
H. All containers managed at the facility are excluded from subch. CC level 1 requirements. If YES, go to Question 15.V.	**N**	
I. Any of the following controls are used on all Level 1 containers subject to subch. CC: **1. Container meets applicable US DOT packaging requirements.** **2. A cover and closure devices form a continuous barrier over the container openings such that when they are secured, there are no visible holes, gaps or other open spaces into the container.** **3. An organic-vapor suppressing barrier is placed on or over the hazardous waste in an open-top container so that the hazardous waste is not exposed to the atmosphere.** **Note: Level 1 standards do not apply to satellite accumulation or RCRA empty containers.**	**C**	664.1086(3)(a)
J. Level 1 containers that do not meet applicable US DOT packaging requirements are equipped with covers and closure devices composed of suitable materials that result in BOTH of the following: **1. Minimize exposure of hazardous waste to the atmosphere.** **2. Maintain integrity of the covers and closure devices.**	**C**	664.1086(3)(b)
K. If a Level 1 container is filled to the final level in one continuous operation, the closure device is promptly secured in the closed position when the filling operation is concluded.	**NA**	664.1086(3)(c)
L. If a Level 1 container is batch filled, the closure device is promptly secured in a closed position when the container is filled to the intended final level OR the batch loading is completed and any of the following first occurs: **1. No additional material will be added within 15 minutes.** **2. The person performing the loading operation leaves the immediate vicinity of the container.** **3. The process generating the waste shuts down.**	**NA**	664.1086(3)(c)
M. If Level 1 containers are opened to remove hazardous waste, the closure device is secured in the closed position upon completion of a batch removal AND when either of the following first occurs: **1. No additional materials will be removed within 15 minutes.** **2. The person removing the waste leaves the immediate vicinity of the container.** Hazardous waste nor rremoved with 15 minutes.	**NA**	664.1086(3)(c)
N. If access to the inside of a Level 1 container is needed to perform routine activities other than the transfer of hazardous waste (e.g., sampling), the closure device is secured in the closed position promptly after completing the activity.	**NA**	664.1086(3)(c)
O. If a Level 1 container is equipped with a pressure relief device that vents to the atmosphere, ALL of the following conditions are met: **1. The device is designed to operate with no detectable organic emissions (< 500 ppmv) when in the closed position.** **2. The device is closed when the internal pressure is within the specified operating range.** **____ The device opens and vents to the atmosphere only for the purpose of maintaining internal pressure according to the design specifications.**	**NA**	664.1086(3)(c)
P. Safety valves are only opened to avoid an unsafe condition.	**NA**	664.1086(3)(c)

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Section 15: Subchapter CC Level 1 Standards for Containers

Q. When first taking possession of a Level 1 container that will not be emptied within 24 hours, the facility visually inspects the container, cover and closure device for visible cracks, holes, gaps or other open spaces on or before the date the facility accepts the container (e.g., signs the manifest). The site inspection on March 15, 2017, showed that when the facility firsts takes possession of a level 1 container that contains hazardous waste subject to CC, the container's cover system is not inspected within 24 hours.	X	664.1086(3)(d)
R. If a Level 1 container remains at the facility for one year or more, the container, its cover and closure devices are visually inspected initially and at least once every 12 months for cracks, gaps or other open spaces.	NA	664.1086(3)(d)
S. When a defect is detected, initial repair efforts are made within 24 hours of detection and completed within 5 calendar days.	NI	664.1086(3)(d)
T. If repairs cannot be completed in 5 days, the waste is removed from the container which is not used until it is repaired.	NI	664.1086(3)(d)
U. Inspections records for subchapter CC containers are maintained in the operating log for at least 3 years.	NI	664.0015(2)(d)
V. If a facility managed hazardous waste with an average VO concentration >500 ppmw or without adequate reduction of the organic content by an organic destruction or removal process in a container exempt from subch. CC level 1, 2 or 3 standards, the facility submitted a written report to the department which includes all of the following information: **1. Name of the facility, EPA ID#, and address.** **2. A description of the noncompliance event and the cause.** **3. The dates of noncompliance.** **4. The actions taken to correct the noncompliance and prevent reoccurrence.**	NA	664.1090(1)
W. The report in Question 15.W is submitted within 15 calendar days of the time the owner or operator becomes aware of the occurrence.	NA	664.1090(1)

Section 16: Subchapter CC Level 2 Standards for Containers

A. The facility manages hazardous waste containers with a design capacity >119 gallons that are in light material service. If NO, go to Section 17.	N	
B. Any of the following controls are used on Level 2 containers: **1. Container meets applicable US DOT packaging requirements.** **2. Each potential leak interface where organic vapor leakage could occur on the container, cover and closure device has been checked to determine that no detectable organic emissions (< 500 ppmv) are occurring.** **3. The facility has demonstrated within the last 12 months that the containers are vapor-tight using Method 27 in appendix A of 40 CFR part 60.**	NA	665.1087(4)(a)
C. If the container is vented inside an enclosure, the enclosure is operated according to the criteria for permanent total enclosures found in Method 204 in appendix M of 40 CFR part 51.	NA	665.1087(5)(b)1
D. If the potential leak interface on the containers were checked, BOTH of the following were met: **1. Checks were made on the interface of the cover rim and the container wall; the periphery of any opening on the container or container cover and its associated closure device; and, the sealing seat interface on a spring-loaded, pressure-relief valve.** **2. The test was performed when the container was filled with a material having a VO concentration representative of the hazardous waste expected to be stored in the container.**	NA	665.1087(4)(a)
E. The facility maintains a copy of the procedure used to determine that containers >119 gallons in size that do not meet DOT requirements are not managing hazardous waste in light material service.	NA	665.1087(3)(e)
F. Level 2 controls are used when transferring waste in or out of the container that minimize exposure to the atmosphere (submerged-fill pipe, vapor-recovery system, etc.) to the extent practical, considering the physical properties of the hazardous waste and good engineering and safety practices.	NA	665.1087(4)(b)
G. If the container is filled to the final level in one continuous operation, the closure devices are promptly secured in the closed position when the filling operation is concluded.	NA	665.1087(4)(c)1.a

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Section 16: Subchapter CC Level 2 Standards for Containers

H. If the container is batch filled, the closure devices are promptly secured in a closed position upon filling the container to the intended final level, or when the batch loading is completed and ANY of the following first occurs: **1. No additional material will be added within 15 minutes.** **2. The person performing the loading operation leaves the immediate vicinity of the container.** **3. The process generating the waste shuts down.**	**NA**	665.1087(4)(c)1.b
I. If containers are opened to remove hazardous waste, closure devices are secured in the closed position upon completion of a batch removal and either of the following first occurs: **1. No additional materials will be removed within 15 minutes.** **2. The person removing the waste leaves the immediate vicinity of the container.**	**NA**	665.1087(4)(c)2.b
J. If access to the inside of the container is needed to perform routine activities other than the transfer of hazardous waste (e.g., sampling), the closure device is secured in the closed position promptly after completing the activity.	**NA**	665.1087(4)(c)3
K. If the container is equipped with a pressure relief device that vents to the atmosphere, the device meets ALL of the following conditions: **1. Designed to operate with no detectable organic emissions when in the closed position.** **2. Closed when the internal pressure is within the specified operating range.** **3. Opens and vents to the atmosphere only for the purpose of maintaining internal pressure according to the design specifications.**	**NA**	665.1087(4)(c)4
L. Safety valves are only opened to avoid an unsafe condition.	**NA**	665.1087(4)(c)5
M. When a defect is detected, initial repair efforts are made within 24 hours of detection.	**NA**	665.1087(4)(d)3
N. Repairs are completed within 5 days, or the waste is removed from the container which is not used until the defect is repaired.	**NA**	665.1087(4)(d)3

Section 17: Subchapter CC Level 3 Standards for Containers

A. The facility manages hazardous waste in containers having a design capacity >26 gallons during a waste stabilization process when hazardous waste is exposed to the atmosphere. If NO, go to Section 18.	**N**	
B. The container is vented directly through a closed-vent system to a control device, or the container is vented inside an enclosure which is exhausted through a closed-vent system to a control device.	**NA**	665.1087(5)(a)
C. If the container is vented inside an enclosure, the enclosure is operated according to the criteria for permanent total enclosures found in Method 204 in appendix M of 40 CFR part 51.	**NA**	665.1087(5)(b)1
D. Records for the most recent set of calculations and measurements verifying the enclosure meets the criteria for a permanent total enclosure in Method 204 in appendix M of 40 CFR part 51 are maintained at the facility.	**NA**	665.1090(4)(a)
E. Level 3 controls are used when wastes are transferred in or out of the container that minimize exposure to the atmosphere (e.g., submerged-fill pipe, vapor-recovery system, etc.) to the extent practical, considering the physical properties of the hazardous waste and good engineering and safety practices.	**NA**	665.1087(5)(f)

Section 18: Financial Responsibility

A. The facility maintains the following proof mechanism for closure: **1. Closure trust fund** **5. Net worth test** **2. Surety bond** **6. Deposit with the department** **3. Letter of credit** **7. Escrow account** **4. Insurance** **8. Multiple financial mechanisms**	**X**	664.0143

A record review on March 28, 2017, showed that MASD does not have financial responsibility for closure of the facility using a financial assurance mechanism that is acceptable to the department.

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Section 18: Financial Responsibility

B. The facility complies with EITHER of the following: **1. The amount of the proof mechanism being maintained is adequate to cover the most recent closure cost estimate.** **2. The facility is taking steps to increase the financial assurance to cover the closure costs within 60 days of a cost increase.** NA was selected since the faclity does not have financial responsibility for closure.	NA	664.0143
C. The facility has the following type of liability coverage for sudden accidental occurrences: **1. Insurance** **5. Surety bond** **2. Financial test** **6. Trust fund** **3. Guarantee** **7. Multiple financial mechanisms** **4. Letter of credit**	NI	664.0147(1)
D. Indicate the date of the most recent financial review done by the Department.		
E. The Department found that the financial responsibility for closure and liability coverage was adequate during the most recent financial review.	NA	

Section 19: License Requirements

A. Facility is in compliance with the conditions of their license. Facility has no license, so NA was selected for 19.A to 19.C	NA	670.032
B. Facility has not exceeded capacity limits for storage or treatment units.	NA	670.032
C. Facility notified the Department or requested a modification to their license, as required, for any changes at the facility.	NA	670.042

Section 20: Waste Minimization

A. Facility has a program to reduce the volume and toxicity of hazardous waste generated to the greatest economical degree possible. The site inspection on March 15, 2017, showed that there is no written waste minimization program and a record review on March 28, 2017, showed that the department has not received from MASD the annual certification for waste minimization.	X	664.0073(2)(i)
B. A waste minimization certification is signed at least annually and is maintained in the facility's operating record.	X	664.0073(2)(i)
C. Facility includes waste minimization information in its annual report. NA was selected since the facility does not have a waste minimization plan nor does the facility file an annual report.	NA	664.0075

Section 21: Used Oil

A. Used oil is managed on-site. If NO, go to Section 22	Y	
B. Used oil containing >= 1,000 ppm halogens is managed as listed hazardous waste or the rebuttable presumption requirements have been met.	NA	679.10(2)(a)2
C. Used oil containers and tanks are in good condition and not leaking.	C	679.22(2)
D. Used oil containers and tanks are marked "used oil".	C	679.22(3)(a)
E. Transporter has an EPA ID number, except when generator self-transports or has a tolling arrangement. Used oil generated at the site is reused as a lubricant.	NA	679.24

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Section 21: Used Oil

F. If oil containing materials are disposed of as a solid waste, the used oil has been properly drained so there is no visible sign of free-flowing oil and a waste determination has been properly made.	**NA**	679.10(3)(a)
G. If used oil is burned in an on-site used oil-fired space heater, all of the following are met: **1. Only used oil from the generator or household do-it-yourselfers is burned.** **2. The heater is designed with a maximum capacity of 0.5 million BTU per hour or less.** **3. The combustion gases are vented to the ambient air.**	**NA**	679.23
H. If used oil is accepted from others or sent off-site to be burned in a space heater, the used oil meets fuel specifications and the marketer requirements in NR 679 subch. H are met.	**NA**	679.11

Section 22: Universal Waste

A. The facility is a small quantity handler of universal waste (never accumulates more than 11,025 lbs). If NO, state in the comments section if the facility is a universal waste nonhandler, large handler or destination facility, and go to Section 23. **Note: If the facility is a large handler, complete the large quantity handler of universal waste inspection form.**	**Y**	
B. Universal waste has not been disposed, treated or diluted. **Note: Dilution or treatment does not include: sorting, mixing, discharging, regenerating, or disassembling batteries; removing batteries from consumer products or removing electrolytes; removing thermostat ampules; or, responding to a release of universal waste.**	**C**	673.11
C. Universal waste batteries and thermostats that are broken or show evidence of leakage or spillage are placed in closed, structurally sound containers that are compatible with the waste and not leaking.	**C**	673.13
D. Universal waste lamps and pesticides are placed in closed, structurally sound containers that are compatible with the waste and are not leaking. No universal lamps on site at time of inspection.	**NA**	673.13
E. All universal wastes are labeled or marked "Waste" or "Used" followed by the specific type of universal waste handled or "Universal Waste". The site inspection on March 15, 2017, showed a bucket that MASD identified as containing universal waste batteries (see photo 42). Neither the bucket nor the batteries were labeled or marked with the phrase "Universal Waste - Batteries", "Waste Batteries" or "Used Batteries".	**X**	673.14
F. Universal waste is accumulated for less than one year from the date generated or received from another handler.	**C**	673.15(1)
G. If universal waste is accumulated beyond one year, the handler can prove that accumulation was necessary to facilitate proper recovery, treatment or disposal.	**NA**	673.15(2)
H Length of accumulation time is demonstrated by any of the following: **1. Each container is marked or labeled with the earliest date the waste is generated or received.** **2. The individual item of waste is marked or labeled with the date it was generated or received.** **3. An inventory system identifying the date the waste was generated or received is maintained.** **4. The universal waste is placed in a specific accumulation area identified with the earliest date the waste was generated or received.** 25.Failure to document the length of accumulation as required by s. NR 673.17 WAC. The site inspection on March 15, 2017, showed that MASD did not have written documentation to show how long the universal waste batteries have been at accumulating at the facility.	**X**	673.15(3)
i. Employees are trained on the proper handling and emergency procedures appropriate to the types of waste handled at the facility.	**NI**	673.16
J. ALL of the following are met when a release occurs: **1. Release is immediately contained.** **2. A waste determination is made.** **3. Spill residue is disposed of properly as solid or hazardous waste.**	**NI**	673.17
K. Handler sends the waste to a destination facility, foreign destination or another handler. Indicate the facilities in the comments section.	**NA**	673.18(1)

TREATMENT & STORAGE FACILITY INSPECTION

This Inspection Form, used for the inspection of facilities having a hazardous waste license to store and/or treat hazardous waste, evaluates facility compliance with Wisconsin's Hazardous Waste Management Rules (chapter NR 660 - 679, Wis. Admin. Code).

Section 22: Universal Waste

L. For hazardous materials, the handler packages, labels, marks, placards and prepares the proper shipping papers in accordance with DOT requirements in 49 CFR parts 172 to 180.	**NI**	673.18(3)
M. The following activities have occurred. If YES, complete the Universal Waste Small Quantity Handler inspection form. **1. Universal waste are sorted or disassembled.** **2. Recalled pesticides are managed.** **3. Universal waste shipments have been rejected.** **4. Universal waste shipments have included hazardous or solid waste.** **5. Universal waste is self-transported.**	**N**	

Section 23: Facility Status Evaluation

A. Describe any other activities the facility is conducting.

The site inspection on March 15, 2017, showed that Mid-American Steel Drum (MASD) receives from off-site non-RCRA empty drums containing hazardous waste to their Oak Creek facility. Some of these drums, when inverted, release hazardous wastes within several seconds. This constitutes a point of generation under RCRA. The amount of waste released can vary, but likely ranges from several ounces to 1.72 gallons (approximate maximum volume for a 55-gallon container with 1" of waste remaining). The chain on the burner drags these hazardous wastes into the burner, which are then burned. This constitutes an operation of a hazardous waste incinerator under subchapter O of chapter NR 554 WAC.

During the site inspection on March 15, 2017, it was learned that MASD receives five to ten semitrailer loads per day of drums. These semitrailer loads typically contain non-RCRA empty drums, which contain hazardous waste. These semitrailer loads are delivered to MASD's Oak Creek facility located at 8570 South Chicago Road, Oak Creek, WI 53154. These semitrailers are owned and operated by MASD. A record review on March 28, 2017, showed that MASD does not have an active hazardous waste transportation license. Note that MASD did have a commercial hazardous waste transportation license (#11357) from 1982 to 1983.

Key : C: Compliance CA: Compliance with Concern R: Returned to Compliance X: Non-Compliance NA: Not Applicable ND: Not Determined NI: Not Inspecte
Y: Yes N: No UN: Unknown Revision : 07/21/2016
Notes : 1. * Dept. approved alternate may apply 2. Questions without a status entry use narrative responses d_report_sub_cme_package_inspection_ff

SITE PHOTOS

Photo # 47324 Photo 1 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction SE
Photographer BAERWALD, CATHERINE

Photo Description
Close up of steel drum located in heavy area.

SITE PHOTOS

Photo # 47325 | Photo 2 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction SE
Photographer BAERWALD, CATHERINE

Photo Description

Pallet of shrink wrapped drums in heavy area.

Photo # 47326 | Photo 3 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction SE
Photographer BAERWALD, CATHERINE

Photo Description

View of heavy drums located in area west of the buildings.

Photo # 47327 | Photo 4 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction SE
Photographer BAERWALD, CATHERINE

Photo Description

Heavy drum in heavy drum area. Drums are located on top a platform and below and in front of platform.

SITE PHOTOS

Photo # 47328 | Photo 5 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction E
Photographer BAERWALD, CATHERINE
Photo Description
Drums in heavy area.

Photo # 47329 | Photo 6 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction NE
Photographer BAERWALD, CATHERINE
Photo Description
Pallets of drums in heavy area.

Photo # 47330 | Photo 7 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction NE
Photographer BAERWALD, CATHERINE
Photo Description
Drums stacked in heavy area.

SITE PHOTOS

Photo # 47331 | Photo 8 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction NE
Photographer BAERWALD, CATHERINE
Photo Description
View of heavy area.

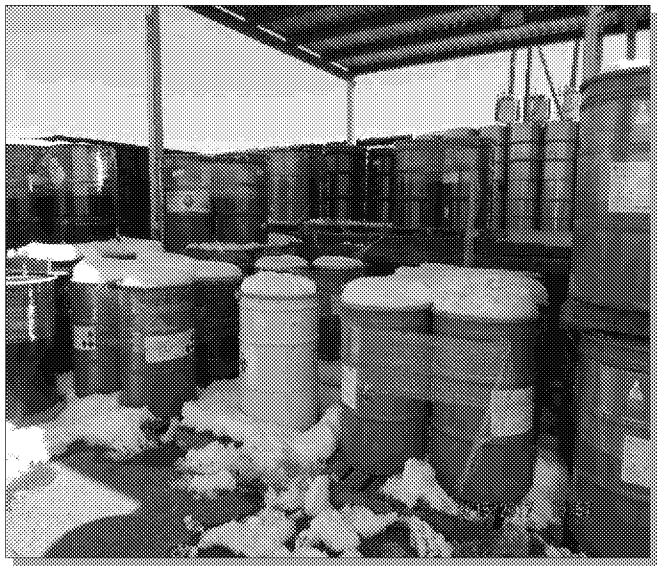


Photo # 47332 | Photo 9 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction E
Photographer BAERWALD, CATHERINE
Photo Description
Close up of flammable labels in heavy area.

Photo # 47333 | Photo 10 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction E
Photographer BAERWALD, CATHERINE
Photo Description
Drums in heavy area. Red stickers have the words "Rejected" on them.

SITE PHOTOS

Photo # 47334 | Photo 11 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction E

Photographer BAERWALD, CATHERINE

Photo Description

Close up of label in heavy area.

Photo # 47335 | Photo 12 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction NE

Photographer BAERWALD, CATHERINE

Photo Description

Drums in heavy area with rejected label and date of 2/28/17.

Photo # 47336 | Photo 13 of 43

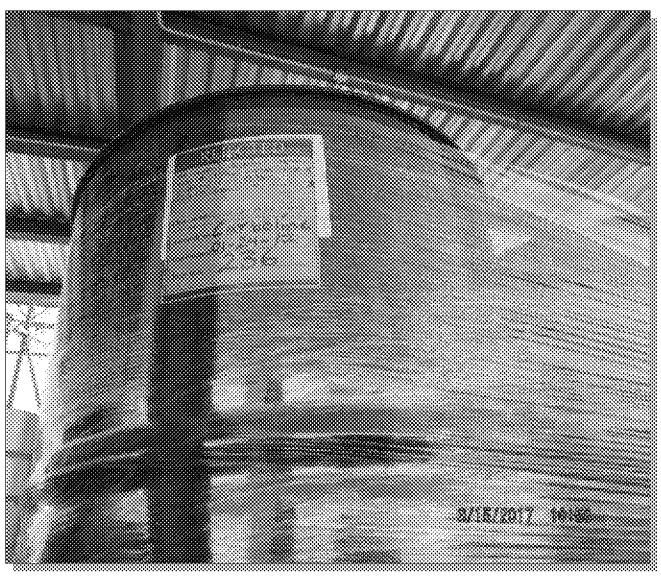
Photo Date & Time 03/15/2017 00:00

Photo Direction E

Photographer BAERWALD, CATHERINE

Photo Description

Close up of label in heavy area. The rejected sticker has a date of 1/24/17.



SITE PHOTOS

Photo # 47337 | Photo 14 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: N

Photographer: BAERWALD, CATHERINE

Photo Description

View of drums with flammable stickers and content labels in heavy drum area.

Photo # 47338 | Photo 15 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: W

Photographer: BAERWALD, CATHERINE

Photo Description

Close up of label in heavy drum area. Paint product with flammable sticker.

Photo # 47339 | Photo 16 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: NE

Photographer: BAERWALD, CATHERINE

Photo Description

Close up of label on drum in heavy area. Label reads that the container is hazardous when empty and may contain explosive or dangerous residues.

SITE PHOTOS

Photo # 47340 | Photo 17 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction E

Photographer BAERWALD, CATHERINE

Photo Description

Close up of paint and flammable label in heavy drum area.

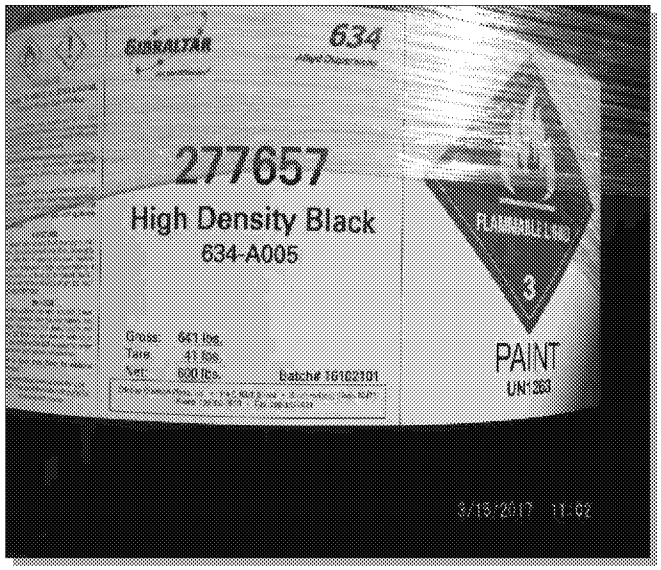


Photo # 47341 | Photo 18 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction NE

Photographer BAERWALD, CATHERINE

Photo Description

Heavy drum area with flammable lableing and contents of solvent based material.

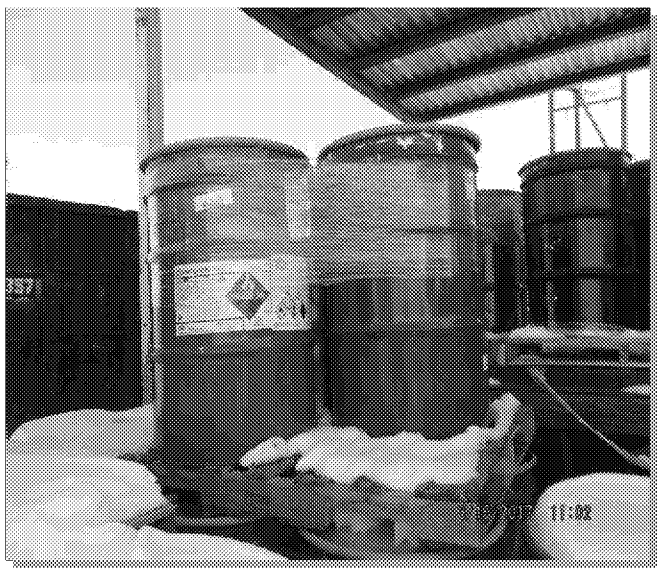


Photo # 47342 | Photo 19 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction E

Photographer BAERWALD, CATHERINE

Photo Description

Close up of drum in heavy area with flammable label.

SITE PHOTOS

Photo # 47343 | Photo 20 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction E

Photographer BAERWALD, CATHERINE

Photo Description

Close up of drum in heavy area. Contents show M-P-A 2000-X

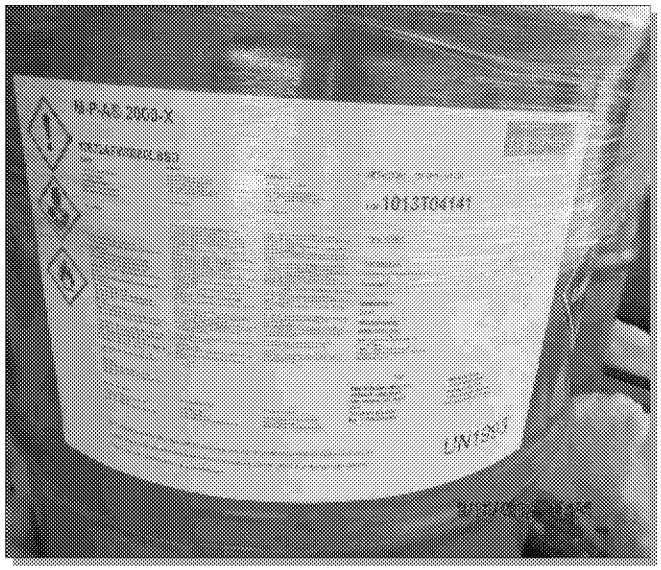


Photo # 47344 | Photo 21 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction SE

Photographer BAERWALD, CATHERINE

Photo Description

Heavy area with drums that have rejected, flammable and the content of the drums on labels.

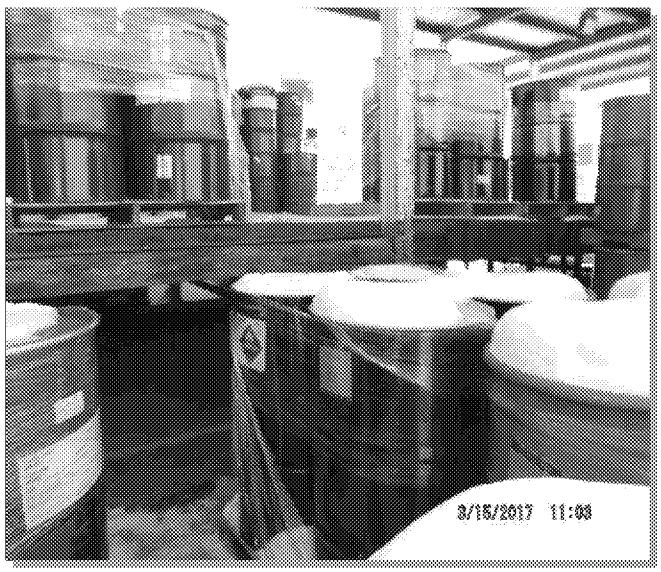


Photo # 47345 | Photo 22 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction E

Photographer BAERWALD, CATHERINE

Photo Description

View of drum that has "hazardous waste" on the label and a flammable symbol.

SITE PHOTOS

Photo # 47346 Photo 23 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction E
Photographer BAERWALD, CATHERINE

Photo Description

Heavy area drum with a methyl acrylate and flammable label.

Photo # 47347 Photo 24 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction SW
Photographer BAERWALD, CATHERINE

Photo Description

Open bung on drum in heavy area.

Photo # 47348 Photo 25 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction SW
Photographer BAERWALD, CATHERINE

Photo Description

East of heavy area and west of burner. View of dumpsters where comingled ash, shot blast and bag house dust is accumulated.

SITE PHOTOS

Photo # 47349 | Photo 26 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: N

Photographer: BAERWALD, CATHERINE

Photo Description

In burner area. View of conveyors of drums that come from cutting room and drums that are unloaded at the dock situated by the burner area. The lids have been removed and placed on top of the drums.

Photo # 47350 | Photo 27 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: N

Photographer: BAERWALD, CATHERINE

Photo Description

Close up drum that had a label with the words "Loctite Liofol" in burner area.

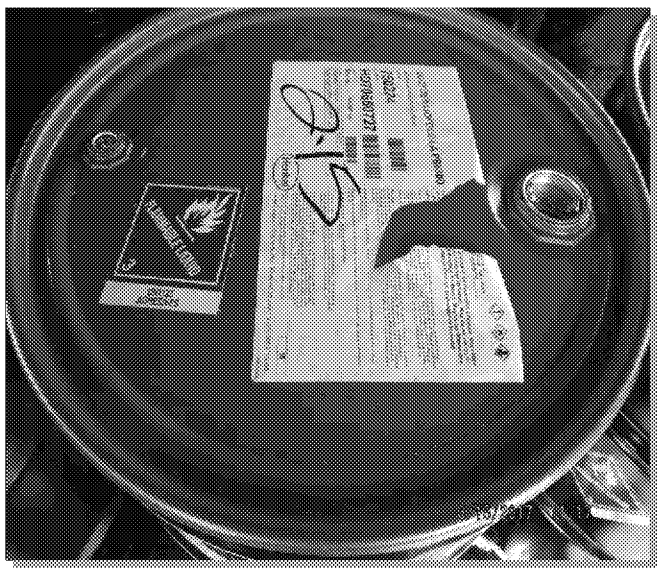


Photo # 47351 | Photo 28 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: N

Photographer: BAERWALD, CATHERINE

Photo Description

Close up drum that had ingredients of primer and a flammable sticker. In burner area.

SITE PHOTOS

Photo # 47352 | Photo 29 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction N
Photographer BAERWALD, CATHERINE

Photo Description

Label with wording of lacquer and flammable liquid. In burner area.

Photo # 47353 | Photo 30 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction NE
Photographer BAERWALD, CATHERINE

Photo Description

View of drums in burner area.

Photo # 47354 | Photo 31 of 43
Photo Date & Time 03/15/2017 00:00
Photo Direction N
Photographer BAERWALD, CATHERINE

Photo Description

Close up lid with label that read flammable liquid.In burner area.

SITE PHOTOS

Photo # 47355 | Photo 32 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: N

Photographer: BAERWALD, CATHERINE

Photo Description

Flammable label on drum in burner area.

Photo # 47356 | Photo 33 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: NE

Photographer: BAERWALD, CATHERINE

Photo Description

Drums in burner area. Lids are placed on top of drums, some drums are observed with no lids.

Photo # 47357 | Photo 34 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: INSIDE

Photographer: BAERWALD, CATHERINE

Photo Description

Cutting room. Drum label is a hazardous waste label and has a flammble label. Lids were not actively removed at the time of the inspection.

SITE PHOTOS

Photo # 47358 | Photo 35 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: INSIDE

Photographer: BAERWALD, CATHERINE

Photo Description

Close up of hazardous waste label in cutting room. Label has ingredients of "waste flammables, acetone and petroleum distillates" and a waste code of D001.

Photo # 47359 | Photo 36 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: INSIDE

Photographer: BAERWALD, CATHERINE

Photo Description

Close up of labels in cutting room. Hazardous waste label has ingredients of "flammable liquids".

Photo # 47360 | Photo 37 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: INSIDE

Photographer: BAERWALD, CATHERINE

Photo Description

Hazardous waste label in cutting room. Label reads " waste flammable liquids", "methyl isobutyl ketone, acetone" and waste codes of D001, F003, F005.

SITE PHOTOS

Photo # 47361 Photo 38 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction INSIDE

Photographer BAERWALD, CATHERINE

Photo Description

Close up drum in cutting room. Drum label read "Epotuf" and "flammable".

Photo # 47362 Photo 39 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction INSIDE

Photographer BAERWALD, CATHERINE

Photo Description

View of drum line in cutting room.

Photo # 47363 Photo 40 of 43

Photo Date & Time 03/15/2017 00:00

Photo Direction INSIDE

Photographer BAERWALD, CATHERINE

Photo Description

View of drums in cutting room. Lids were not being removed during inspection. Photo shows black drum middle front with an open bung.

SITE PHOTOS

Photo # 47364 | Photo 41 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: INSIDE

Photographer: BAERWALD, CATHERINE

Photo Description

Close of label of "Byketol-HS" and flammable symbol in cutting room.

Photo # 47365 | Photo 42 of 43

Photo Date & Time: 03/15/2017 00:00

Photo Direction: INSIDE

Photographer: BAERWALD, CATHERINE

Photo Description

In office area conference room, universal waste bucket. the wording of universal waste was on the container but no description of contents or dating.

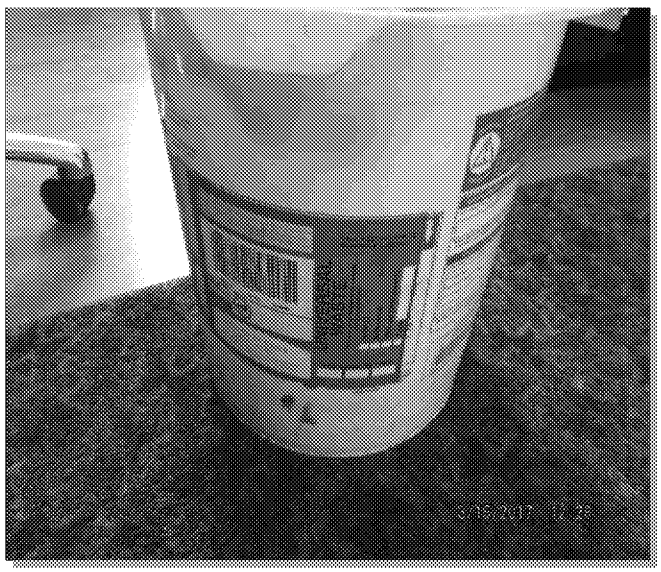


Photo # 47366 | Photo 43 of 43

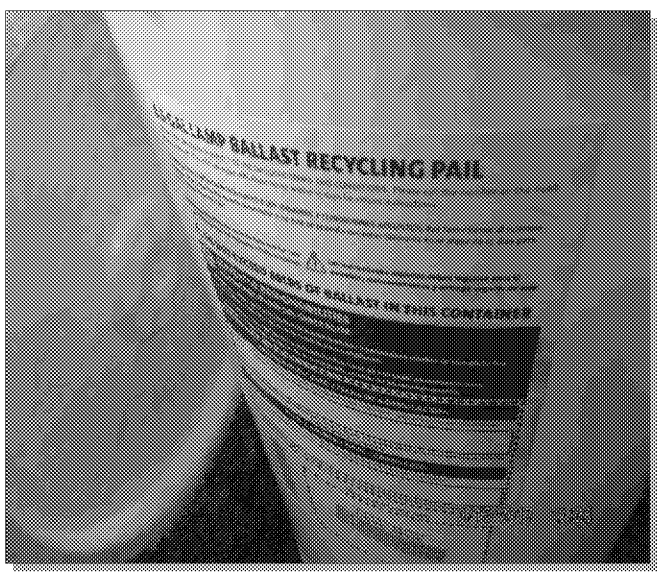
Photo Date & Time: 03/15/2017 00:00

Photo Direction: INSIDE

Photographer: BAERWALD, CATHERINE

Photo Description

Close up of lamp ballast recycling pail label. In conference room in office area.



State of Wisconsin
Department of Natural Resources

Form 4430-5 (R. 03/06)

COMPLIANCE MONITORING AND EVALUATION FORM

A. GENERAL INFORMATION

FIST SEQ #: 59059

Facility Name (current)	FID #	EPA ID #	Case #	Complaint #
CONTAINER LIFE CYCLE MANAGEMENT-ST. FRANCIS	341158070	WIR000131367	59059	

Street/Location	Notification Status
3950 S PENNSYLVANIA AVE	HW GENERATOR - SMALL

City	Zip Code	County	Type of Contact	Contact Date/Time
SAINT FRANCIS	53235-	MILWAUKEE	FIELD	03/22/2017 09:00

Contact Name/Phone Number		Staff Assigned to Site	Case Close Out Date
MARK FURGASON, PLANT MANAGER	(414) 483-8800	BAERWALD, CATHERINE	

B. FACILITY INSPECTED AS

Inspection Type
HW GENERATOR - SMALL

C. NOTIFICATION CHANGE

Date processed SHWIMS_____, EPA Data System_____

Status Change: Field Verified Status Is _____

Name Change: Former Name _____

D. ACTIVITY TYPES

Lic/RU/RA	Staff Person	Lead Program	Activity Type
	ELLENBECKER, MICHAEL J	HAZARDOUS WASTE	OTHER
	BAERWALD, CATHERINE M	HAZARDOUS WASTE	ASSIST LEAD STAFF

E. ACTIONS AND VIOLATIONS

Action Date	Action Type	Close Date	SNC	Comments
	NON			

Viol. Type	Action Type	Violation Discovery Date	Action Date	Response Due Date	Actual Compliance Date	Viol. Status Code	Code or Statute Citation	Code or Statute Description
	NON	03/22/2017				X	664.0013(1)(a)	Detailed chemical and physical analysis
	NON	03/22/2017				X	668.50(1)(b)	Each container marked with start date
	NON	03/22/2017				X	664.0073(2)	Operating record
	NON	03/22/2017				X	664.0075	Annual reports to Dept by March 1
	NON	03/22/2017				X	664.0076	Unmanifested waste report within 15 days
	NON	03/22/2017				X	664.0035	Adequate aisle space
	NON	03/22/2017				X	664.0014(2)	Preventing entry
	NON	03/22/2017				X	664.0014(3)	Signs posted
	NON	03/22/2017				X	664.0015(1)	Inspections conducted frequently enough
	NON	03/22/2017				X	664.0072(4)(a)	Impossible to forward
	NON	03/22/2017				X	664.0174	Container storage areas inspected weekly
	NON	03/22/2017				X	664.0175(2)(a)	Containment system integrity
	NON	03/22/2017				X	664.0143	Proof mechanism for closure
	NON	03/22/2017				X	664.0073(2)(i)	Reduce the volume and toxicity
	NON	03/22/2017				X	664.0073(2)(i)	Reduce the volume and toxicity
	NON	03/22/2017				X	664.1086(3)(d)	664.1086(3)(d) / 664.1086(3)(d)
	NON	03/22/2017				X	670.001(3)	No HW storage license
	NON	03/22/2017				X	663.13	No HW transportation license
	NON	03/22/2017				X	663.20	Obtain from the generator manifest

F. CASE CONTACTS

Region Signature(s)	Date Signed	d_report_main_site_contact_cme_package_f
BAERWALD, CATHERINE		Page 1 of 28

F. CASE CONTACTS

G. COMMENTS

SITE NARRATIVE

Narrative:

CASE ACTIVITY REPORT
Form 4100-182 9-99State of Wisconsin
Department of Natural Resources

Case Number

59059
Case Title

Container Life Cycle Management, LLC

Activity

St. Francis - Compliance Evaluation Inspection Narrative
Date of Activity

March 22, 2017

EPA ID#: WIR000131367
FID#: 341158070
Address: 3950 S. Pennsylvania Avenue, St. Francis, WI

On March 22, 2017 at approximately 9:00 a.m., Waste Management Specialist Catherine Baerwald arrived at Container Life Cycle Management (CLCM)located at 3950 South Pennsylvania Avenue in St. Francis. Baerwald signed into the registration log and went upstairs to a room overlooking the facility to participate in a large quantity generator hazardous waste compliance evaluation inspection (LQG HWCEI) ((it was later determined that a treatment, storage, and disposal [TSD] facility inspection form was more applicable to CLCM than a LQG inspection form). In the room and included in the inspection was Mike Ellenbecker, DNR Hazardous Waste Program Coordinator, Linda Benfield of Foley & Lardner LLP, Mark Furgason, CLCM-St. Francis Plant Manager, and Steele Johns, Environmental Health & Safety Manager for Greif. The inspection was announced earlier that morning by a phone call from Ellenbecker. Photos were taken and copies were made available to the facility. Hearing protection, hard hat, vests, safety glasses and steel toe shoes were worn.

CLCM-St. Francis receives drums from customers and the CLCM-Oak Creek location. Ferguson stated that the number of drums that arrive at the CLCM-St Francis facility from Oak Creek varies, some days no drums are received and other times St. Francis could get five to six loads (approximately 300 drums) total. The majority of drums and totes come from customers (90%), transported by Mid America Steel Drum (MASD), with the trailers loads ranging between 160-300 drums / totes. The facility cleans approximately 1700 drums a day. Totes are transported by MASD to the Cornell Street facility in Milwaukee. Drums that remain at St. Francis are steel and poly close-headed, with a few open-headed drums. Furgason said that the facility mostly deals with 55-gallon steel drums and the poly drums are a small percentage of drums cleaned. The steel drums come in on a loading dock located on the north side of the facility and the poly drums are received on a loading dock on the east side of the facility where the shipping dock for both the poly and steel drums is also located.

Trailers are located in the yard of the facility and the average time to process the drums is 30 to 60 days. Furgason said if the drums are in high demand or good quality, drums could be processed in one day. Steel drums that are washable are in high demand. The ratio of poly to steel drums into St. Francis changes daily. Poly drums are scrapped and shredded if there is an odor issue, stained, or otherwise not able to be cleaned. The percentage of poly drums sent out for regrind is 10 to 20 percent.

Johns and Furgason described the facility operations. Steel drums and poly drums are on separate lines. The poly line is in the process of being converted to where the steel drum line is located and presently is not automated. Employees have to pick up poly drums and invert them onto a conveyor to be washed. The proposed move will make more room for the grinder area and drums will be able to be shredded more frequently. Equipment to switch the poly line process is at the facility but was not installed or electrically connected at the time of the inspection. The new poly line will connect to the steel drum line. Drums are flushed before they are shredded and Johns said that they will continue that practice after the poly line is moved. Shipping will stay at the same area where it is located presently. After the drums are washed internally, they are inspected and placed at the shipping dock. Drums are examined visually and if not passable they are placed at the grinder. Washing and grinding the scrapped drums is only done when employees are available. A different conveyor system will take good poly drums to the cleaning system.

Tight end steel drums receive an internal flush or pre-wash and then they are shot blasted. The drums are then cleaned and prepared to be painted. After the paint booth, the drums are dried and then sent out to customers. The steel drum line has two separate conveyors and flushers, one for drums that contained oil and another for ones that contained chemicals. There are separate wash tanks and pre-flush sources for the oil and chemical steel drum lines. The pre-flush for oil is composed of hot water and the pre flush for chemicals contains hot water and sodium hydroxide for a pH adjustment to eight or nine in case drums held a material that was acidic. After the pre-flush, the drums are washed on the outside in separate steel and poly lines. This wash tank holds hot water. After the external wash, the steel and poly drums are internally washed again separately with hot water. The steel drum wash is comprised of three wash tanks for chemicals that may include some rust inhibitor as a preservative and one wash tank for oils. The water is replenished into the first tank, which will feed the second tank and proceed into the third tank; the cleanest tank is the first tank and it receives fresh water all day. Drums are then inspected. If the drum is bad or rusty it is internally rinsed with hydrochloric acid and the inside is washed again. Bungs are then attached to seal the drum. The drum's outside is blasted and grinders are used to get rid of any labeling. Then the drum is painted and dried in an oven. The bung is taken out and compressed air is used inside to purge and dry the drum. Next comes testing, inspection, installment of the bung and out to the loading dock for shipment.

inspection, installment of the bung and out to the loading dock for shipment.

The poly drums only contained chemicals. Two wash tanks are on the poly line. Poly drums have an internal prewash of hot water and caustic for pH adjustment of acid containing drums. It then is washed on the outside and washed internally again. No rust inhibitor is included with the poly wash. The drum will be on its side and a flame of heat is used for drying. Air purge rods go into the drum; it is then inspected, tested, bungs are replaced and the drums are ready for shipment.

Wastes come from the drum cleaning operation. There is a wastewater treatment system onsite. The heat tanks that hold the process water feed into the wastewater system. Tanks will go from clean to less cleaner tanks and end up in the wastewater unit. The tanks will be dumped once a week into the wastewater system. Water is always added to the tanks on account of evaporation. The system will produce a cake of diatomaceous earth and that is shipped off-site as nonhazardous. Ellenbecker asked how much cake is generated and Furgason stated that "Bob" the wastewater operator would know the amounts. The resulting water is discharged to the sanitary sewer. A waste is also generated when the tanks are cleaned. The tanks will accumulate waste material from substances that came from the drums when washed. Tanks are numbered 1 to 4 with one of the tanks being for oil wash. Number one tank is the dirtiest and will be cleaned approximately once a month. The number four tank has the freshest water and will be cleaned every six to seven months.

Furgason stated that this system is different than other drum reconditioners around the country. Johns said that there are many drum reclaimers presently operating. Drums can be reconditioned up to six times before no longer useful or passes quality. Baerwald asked how the facility determines if a drum is empty. Furgason stated that the employees can tell by feel or the weight of a drum. If not empty, the facility calls it a "heavy" drum and puts it in a designated area. Furgason said the employees do not want to lift heavy drums. Personnel work in one position and do not rotate between areas or duties.

A tour of the facility was conducted. Ellenbecker, Baerwald, Benfield, Johns, and Furgason went outside to access the steel drum loading dock area. Employees were actively unloading drums. The group walked to the "heavy area" where approximately 34 drums were situated along with nine totes. Ferguson stated that customers pick up the heavy totes daily. Labels on the drums explained that contents included "ethyl acetate", "Silgan XA" solvent, "hazardous waste" labels with ingredients of "toluene" and "acetone", waste codes of D001, D035, F003, and F005, "paint line flush", "methylene chloride" and also "flammable" labels. On some of the drums were rejected stickers that had dates, a batch number corresponding to the customer and the information of how many drums were in the batch. Some of the dates observed were 2/24/17, 3/10/17, 3/14/17 and 3/16/17. Johns and Furgason were unsure if the dates correspond to the date received or the date the heavy determination was made.

Drums that were on the loading dock had labels of methyl ethyl ketone, ammonia, ammonia hydroxide, acetic acid, sulfuric acid, muriatic acid, and battery acid. The inspection proceeded into the facility. Painting, shot blast and drying operations were observed for both lines. At the steel drum line, the wash process was observed. Waste was observed leaving some drums labeled "Hydrite Blend" and one drum that had a partial label of "methyl amyl". Both drums were labeled as flammable. At the wastewater unit there were some drums that had nonhazardous waste on the labels. Furgason stated the waste was from the wash water sludge clean out and the wastewater unit. Drums of nonhazardous waste were also situated in the middle of the facility. The poly wash line was observed and a tour of the loading/unloading area was conducted. Some drums had labels with "hydrogen peroxide" and "oxidizer" on them.

Back upstairs, Ellenbecker went over the large quantity generator checklist. No manifest or LDRs were available at the time of the inspection. Manifest in the past included waste codes of D005 (barium) and D007 (chromium). The facility last manifested in August of 2016. Ellenbecker asked Furgason what was the waste that was manifested and Furgason stated it was from shot blast material. Baerwald inquired about the annual reports. Furgason identified "Tiffany" in the office most likely did the reporting for the past year. Benfield said that a list of documentation needed could be submitted to her and she would respond to the request with the appropriate paperwork. Ellenbecker questioned about training at the facility. Johns conducts the same training at all three Milwaukee area locations. The facility has telephones and walkie-talkies; there is no intercom due to noise issues inside the building. There are fire extinguishers, spill control and two eyewashes that are tested, maintained and connected to heated water so the employees will not recoil when flushing their eyes. Furgason indicated that there is an emergency contractor and that it was in the contingency plan but could not remember the name. A local clinic is familiar with the facility according to Ferguson, and a Dr. Seder had a walk through to see what activities were occurring at the location. Waste minimization includes the poly drum shredding and recycling of the material.

Used oil is contained in a tank and properly labeled. It comes from the oil separation from the wash tanks. Used lamps are generated and Furgason mentioned used lamps were not in closed containers at a prior inspection.

Johns stated that the company is part of the Reusable Industrial Packaging Association (RIPA), which is a drum cleaning association. The building was constructed in 1994 and previously the Kitzinger Cooperage Corporation, which also used a building located across the street from the present facility.

Baerwald asked what an employee would do if a drum that was already on the wash line was shown to contain a material inside. Furgason said the drum would be returned to the customer and the company would not process it. Ellenbecker stated there was concern about the inventory system of heavy drums. Furgason explained employees will green tag the drum, Tiffany will enter it on a sheet and will then enter the date it is picked up from the customers. It is not clear if the date on the drum was the date it was delivered from the customer or the date the drum came off the trailer. Ellenbecker also expressed concern about material quickly flowing out of approximately twenty percent of the drums. Benfield specified that this may be something for further discussion. Ellenbecker and Baerwald thanked Furgason for his time and planned to meet Johns and Benfield for another inspection at the Cornell Street facility in Milwaukee later that day. The inspectors left the facility at approximately 10:55 a.m.

Safety data sheets were obtained to reflect the drums observed and matching the photos taken at the inspection.

Heavy Area:
Methylene Chloride: no flashpoint, no pH- not RCRA hazardous waste for ignitability or corrosivity.
Brenntag Ethyl Acetate: flashpoint 24.8F-hazardous waste ignitable
Brenntag Silgan XA Solvent: flashpoint 79F- hazardous waste ignitable

Incoming drums on dock:
Hydrite Acetic Acid Glacial EC: flash point 102F, pH 2.4, hazardous waste

Hydrite Acetic Acid Glacial F.G. flash point 102F, pH 2.4- hazardous waste
Hydrite Ammonia Solution F.G.: pH 14-hazardous waste for corrosivity
Ammonium Hydroxide: pH 11.6- not corrosive for pH
Hydrite Sulfuric Acid 66 DEG: pH<1- hazardous waste for corrosivity
Hydrite Muriatic Acid 20 DEG Inhibited: pH<1- hazardous waste for corrosivity
Hydrite Battery Acid 1.265: pH<1- hazardous waste for corrosivity
Drums on wash conveyor line:
Methyl Amyl ?-Had DOT ignitable sticker, but last word was smeared. Unable to determine hazardous waste by label.
Hydrite Blend 5277: flashpoint 7F- hazardous waste for ignitability
Hydrite Blend 4775: flashpoint 64F- hazardous waste for ignitability

Specialist Reporting

Catherine Baerwald, Waste Management Specialist-Senior
Date of Report

March 23, 2017
Exhibit Reference

TREATMENT & STORAGE FACILITY INSPECTION

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Section 1: Waste Received from Off-Site

A. Each manifest is signed and dated to certify receipt. Non-RCRA empties (i.e., containers holding hazardous waste) are routinely received at the facility without a uniform hazardous waste manifest. Since a manifest is not used NA was selected 1.A - 1.H.	NA	664.0071(1)(a)
B. Significant manifest discrepancies are noted, if applicable.	NA	664.0071(1)(b)2
C. A copy of the signed manifest is provided to the transporter.	NA	664.0071(1)(b)3
D. A copy of the signed manifest is sent to the generator within 30 days.	NA	664.0071(1)(b)4
E. A copy of the signed manifest is sent to the Department within 45 days.	NA	664.0071(1)(b)4
F. A copy of the signed manifest is retained on-site for at least three years. The facility does not use a manifest so 'NA' was selected.	NA	664.0071(1)(b)5
G. If a significant manifest discrepancy is noted, the facility attempts to reconcile the discrepancy with the generator or transporter.	NA	664.0072(3)
H. If there is no resolution within 15 days of receiving the waste, the facility immediately submits a letter to the Department describing the situation and a copy of the manifest. The facility does not use a manifest so 'NA' was selected.	NA	664.0072(3)

Section 2: Rejected Shipments of Waste or Excess Residue in Containers

A. Facility has rejected shipments of hazardous waste or received containers with residues exceeding quantity limits for empty containers. If No, go to Section 3. Faclity also process non-RCRA empties conatiners.	Y	
B. Facility consulted with the generator before forwarding the waste to another facility. Non-RCRA empties are only returned to the generator either by a courier or generator comes to pick up containers.	NA	664.0072(4)(a)
C. Facility returns the rejected waste or residue to the generator when they can not forward the waste to an alternate facility. During the site inspection on March 15, 2017, it was learned that all non-RCRA empty drums containing hazardous waste are returned to the generator. These non-RCRA empty drums can only be returned to the generator when it is impossible to locate an alternative facility that can receive the hazardous waste.	X	664.0072(4)(a)
D. Facility sends the waste to an alternate facility or the generator within 60 days of rejection or identifying the excess container residue. The facility stated they do not use a manifest for rejected shipments. Based on this 'NA' was selected for 2.D to 2.K.	NA	664.0072(4)(a)
E. Facility ensures the delivering transporter retains custody of the waste.	NA	664.0072(4)(b)
F. Facility provides secure, temporary custody of the waste before delivery to the first transporter.	NA	664.0072(4)(b)
G. Facility complies with the following if they use the original manifest to reject a full load to an alternate facility before the transporter leaves: **1. The facility forwards the rejected shipment to an alternate facility identified in Item 18b.** **2. The facility keeps one copy of the manifest for their records and gives the other copies to the transporter.**	NA	664.0072(5)(g)
H. Facility complies with the following if they use the original manifest to return a rejected shipment to the generator before the transporter leaves: **1. Complete items 18a and 18b, using the generator's information as the alternate facility.** **2. Retain one copy of the manifest and give the other copies to the transporter.**	NA	664.0072(6)(g)

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Section 2: Rejected Shipments of Waste or Excess Residue in Containers

I. Facility complies with the following if they return a rejected waste to the transporter or generator after the manifest has been signed and dated: **1. Amend their copy of the manifest by indicating the rejected waste or residue in the discrepancy space of the manifest.** **2. Copy the manifest tracking number from Item 4 of the new manifest to the discrepancy space of the amended manifest.** **3. Re-sign and date the manifest to certify the amended information.** **4. Retain a copy of the amended manifest for at least 3 years from the date of the amendment.** **5. Send a copy of the amended manifest to the transporter, generator, and department within 30 days.**	NA	664.0072(7)
J. Facility complies with the following for other rejected waste or residues sent to an alternate facility: **1. Prepare a new manifest according to the appendix in 40 CFR part 262.** **2. Write the generator's EPA ID #, name and address on the manifest in Items 1 and 5.** **3. Write the alternate designated facility and EPA ID # in Item 8.** **4. Copy the manifest tracking number in Item 4 of the old manifest to the special handling block in Item 14 and indicate the shipment is a residue or rejected waste.** **5. Copy the manifest tracking number in Item 4 of the new manifest to the manifest reference number in Item 18a of the old manifest.** **6. Write the DOT description in Item 9, including container types, quantity and volume of waste.** **7. Sign the certification in Item 15 as the offerer of the shipment.**	NA	664.0072(5)
K. Facility complies with the following for other rejected waste or residues sent back to generator: **1. Prepare a new manifest according to the appendix in 40 CFR part 262.** **2. Write the facility's EPA ID# in Item 1 and the generator's name and address in Item 5 of the new manifest.** **3. Write the name and EPA ID# of the initial generator as the designated facility in Item 8.** **4. Copy the manifest tracking number in Item 4 of the old manifest to the special handling block in Item 14 of the new manifest and indicate the shipment as a residue or rejected waste.** **5. Copy the manifest tracking number in Item 4 of the new manifest to the manifest reference line in the discrepancy block of the old manifest in Item 18a.** **6. Write the DOT description in Item 9, including container types, quantity and volume of waste.** **7. Sign the certification in Item 15 as the offerer of the shipment.**	NA	664.0072(6)

Section 3: Waste Analysis Requirements

A. Before treatment or storage, the facility obtains a detailed chemical and physical analysis of all incoming wastes. The site inspection on March 15, 2017, it was learned that MASD does not have a WAP.	X	664.0013(1)(a)
B. Waste samples are analyzed by laboratories certified or registered under NR 149. Provide lab names and certification numbers. Since the facaility does not have a WAP, 'NA" was slected for 3.B to 3.E.	NA	664.0013(1)(a)1
C. Waste analysis is repeated when EITHER of the following occurs: **1. The process generating the waste has changed.** **2. The shipment received does not match the waste designated on the manifest.**	NA	664.0013(1)(c)
D. Facility follows the stated procedures to inspect and, if necessary, analyze each incoming waste shipment to determine if the incoming waste matches the waste specified on the manifest.	NA	664.0013(3)
E. Facility follows their written waste analysis plan by performing ALL of the following: **1. Test the waste for the stated parameters.** **2. Use the stated test methods for each of the parameters.** **3. Use the desiginated sampling methods to obtain representative samples.** **4. Review or repeat the initial analysis according to stated frequencies.** **5. For off-site facilities, maintain waste analysis records supplied by generators.**	NA	664.0013(2)

Section 4: Waste Generated On-Site and Waste Shipments

A. A hazardous waste determination has been made on each solid waste generated.		662.011
B. Waste samples are analyzed by laboratories certified or registered under NR 149. Provide lab names and certification numbers.		662.011(3)(a)
C. Waste determinations are made correctly, considering the listed waste definitions and the characteristics of the waste, in light of the materials or processes used.		662.011(3)

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Section 4: Waste Generated On-Site and Waste Shipments

D. Records of all waste determinations are kept on-site for at least 3 years from the date the waste was last sent to a storage, treatment or disposal facility.		662.040(3)
E. A manifest is initiated with all off-site shipments of hazardous waste. The facility stated they no longer generate a hazardous waste and therefor there are nomanifest. Based on this 'NA' was selected for 4.E to 4.R.	NA	662.020(1)
F. The manifest is used according to the instructions in the appendix to 40 CFR part 262.	NA	662.020(1)
G. The facility designated on the manifest is permitted or licensed to accept the waste.	NA	662.020(2)
H. For out-of-state shipments, a copy of the manifest is sent to the department within 30 days of receiving the signed copy from the designated facility.	NA	662.023(3)
I. Manifest continuation form, EPA form 8700-22A, is prepared according to the instructions in the appendix of 40 CFR part 262.	NA	662.020(1)
J. Copy of the manifest signed by the facility is retained until the signed copy from the designated facility is received.	NA	662.040(1)
K. Copy of each manifest is kept for at least three years from the date of shipment.	NA	662.040(1)
L. Transporter or TSD is contacted if the signed manifest is not received in 35 days.	NA	662.042(1)
M. Exception report is submitted to the Department if signed manifest is not received within 45 days.	NA	662.042(2)
N. Hazardous waste is packaged according to applicable DOT requirements before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.030
O. Hazardous waste is labeled according to applicable DOT requirements before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.031
P. Hazardous waste is marked according to applicable DOT requirements before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.032(1)
Q. Containers of 119 gallons and less are marked with the "Hazardous Waste-Federal law prohibit improper disposal" label before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.032(2)
R. Placards are offered to the initial transporter.	NA	662.033

Section 5: Land Disposal Restrictions

A. Facility has determined if each waste is prohibited from land disposal by lab analysis or generator knowledge.	C	668.07(1)
B. Facility complies with the prohibition against dilution of wastes.	C	668.03
C. A one-time written notice is sent to each treatment, storage or disposal facility with the initial waste shipment. No more LDR documents since the faclity claims they no longer genertes a hazardous waste. Because of this 5.C to 5.H have been marked as 'NA'	NA	668.07(1)

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Section 5: Land Disposal Restrictions

D. A new notification is sent to the TSD and maintained in the generator file when the waste or receiving facility changes.	NA	668.07(1)
E. If the waste MEETS treatment standards, the LDR notice certifies the waste may be land disposed without further treatment.	NA	668.07(1)
F. If the waste EXCEEDS treatment standards, the LDR notice gives notification of appropriate treatment and application prohibitions.	NA	668.07(1)
G. Underlying hazardous constituents have been identified for characteristic wastes.	NA	668.09(1)
H. Generator has identified the treatment standards for the listed waste code, in lieu of the treatment standard for the characteristic waste code, when waste is both a listed and characteristic waste OR has identified the treatment standards for all applicable listed and characteristic waste codes.	NA	668.09(2)
I. Each container is clearly marked to identify its contents.	C	668.50(1)(b)
J. Each container is marked with the date on which each period of accumulation began. The site inspection on March 22, 2017, of the 'heavies' storage area showed that the drums containing hazardous waste were not dated with the date the drum arrived at the facility.	X	668.50(1)(b)
K. The facility may store the wastes for up to one year unless the department can demonstrate that the storage was not solely for the purpose of accumulation of quantities of hazardous waste as are necessary to facilitate proper recovery, treatment or disposal.	NA	668.50(2)
L. If waste is stored for more than 1 year, the facility can prove that storage is necessary to facilitate proper recovery, treatment or disposal.	NA	668.50(3)

Section 6: Recordkeeping and Reporting

A. An operating record is maintained at the facility.	C	664.0073(1)
B. The operating record contains ALL of the following information, as applicable: **1. Description and quantity of each waste received.** **2. Method and date of each wastes treatment, storage or disposal.** **3. Location and quantity of each hazardous waste within the facility.** **4. Records and results of the waste analysis performed.** **5. Summary reports and details of all incidents that required implementation of the contingency plan.** **6. Closure cost estimates and any changes that are made in these estimates.** **7. Other monitoring, analytical data and testing, as required.** **8. For off-site storage and treatment facilities, a copy of the LDR notice required by the generator or the owner/operator.** **9. For on-site storage and treatment facilities, the information contained in the LDR notice, except the manifest number, required by the generator or owner/operator.** The site inspection on March 22, 2017, showed that the facility operating record lacked the information identifed above.	X	664.0073(2)
C. Documents in the operating record are maintained until closure of the facility.	C	664.0073(2)
D. Annual reports covering facility activities during the previous calendar year are submitted to the Department by March 1 of the following year. A review of department records on March 28, 2017, showed that MASD's annual reports do not include hazardous waste that was received from off-site.	X	664.0075
E. Facility submitted an unmanifested waste report within 15 days if the facility received a waste from an off-site source without an accompanying manifest or shipping paper AND the waste is not excluded from manifest requirements due to VSQG status. The site inspection on March 22, 2017, showed that MASD receives from off-site non-RCRA empty drums containing hazardous waste without an accompanying uniform hazardous waste manifest.	X	664.0076

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Section 6: Recordkeeping and Reporting

F. Annual reports and unmanifested waste reports are available for inspection.	NA	664.0074(1)

Section 7: Preparedness and Prevention

A. Facility is equipped with ALL of the following, unless the equipment is not necessary for the types of wastes handled: **1. Device to summon emergency assistance (e.g., telephone, 2 way radio).** **2. Internal communications and alarm systems.** **3. Portable fire extinguishers.** **4. Fire control equipment, including special extinguishing equipment.** **5. Spill control equipment.** **6. Decontamination equipment (e.g., eyewash, shower).** **7. Water at adequate volume and pressure to supply water spray systems.**	C	664.0032
B. Emergency equipment listed in Question 7.A is tested and maintained to assure its proper operation in an emergency.	C	664.0033
C. There is immediate access to internal or external alarms or an emergency communication device in hazardous waste handling areas.	C	664.0034
D. Facility has made ALL of the following arrangements with emergency organizations: **1. Primary and support roles have been defined if multiple police and fire departments could respond to an emergency.** **2. Police, fire and emergency response teams are familiar with the facility layout, hazards of the waste handled, places where personnel work, entrances and roads in the facility and possible evacuation routes.** **3. Agreements are made with emergency response contractors and equipment suppliers.** **4. Local hospitals are familiar with the properties of wastes handled and the types of injuries or illnesses that could result from an emergency.**	C	664.0037
E. Aisle space is provided throughout the facility to allow for the unobstructed movement of personnel and all emergency equipment. he site inspection on March 22, 2017, showed inadequate aisle space, which obstructed the movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment for the area where the heavies are stored and for the hazardous wastes stored in the semitrailers.	X	664.0035

Section 8: Contingency Plan

A. Facility has a written contingency plan that will be implemented immediately in the event of a fire, explosion or hazardous waste discharge. Compliance with the contingency plan requirments was based on the LQG inspection conducted on 11/15/2016.	C	664.0051
B. Facility amended a SPCC plan or other emergency plan so it sufficiently incorporates hazardous waste management provisions.	NA	664.0052(2)
C. Copies of the contingency plan and all revisions have been made available to police, fire, hospital and emergency response teams.	C	664.0053(2)
D. Contingency plan was amended due to ANY of the following: **1. Facility license was revised.** **2. Contingency plan failed in an emergency.** **3. Changes in site design, construction, O&M, or other circumstances affect emergency response.** **4. Emergency coordinators changed.** **5. Emergency equipment changed.**	C	664.0054
E. Contingency plan identifies an emergency coordinator who meets ALL of the following: **1. Available or on call to coordinate emergency response measures.** **2. Familiar with all aspects of site activities and the contingency plan.** **3. Has authority to commit the resources needed to carry out the contingency plan.**	C	664.0055

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Section 8: Contingency Plan

F. Contingency plan includes ALL of the following: **1. Designation of the primary emergency coordinator, with alternates listed in the order of assuming responsibility.** **2. Name, address and phone number, office and home, for each emergency coordinator.** **3. Description of the arrangements agreed to by the police, fire, hospitals and emergency response teams to coordinate emergency services.** **4. Evacuation plan for personnel including signal(s) to be used in the event of evacuation and alternate routes.** **5. Actions facility personnel will take in response to a fire, explosion or hazardous waste discharge.** **6. List of emergency equipment at the facility including location, description, and capabilities of each item.**	C	664.0052
G. Contingency plan requires the emergency coordinator to do ALL of the following in the event of a fire, explosion, or discharge of hazardous waste: **1. Activate internal alarms or communication systems.** **2. Notify appropriate authorities, if their help is needed.** **3. Identify the character, source, amount, and extent of discharged hazardous materials.** **4. Assess hazards to human health and the environment.** **5. If the incident threatens human health or the environment outside the facility, notify local authorities that evacuation may be necessary and notify the national response center (800-424-8802) and the division of emergency government (800-943-0003).** **6. Take all reasonable measures necessary to ensure fires, explosions and discharges do not occur, reoccur, or spread.** **7. Monitor for leaks, pressure buildup, gas generation or ruptures in valves, pipes, or other equipment if the facility stops operation.** **8. Provide for treating, storing, or disposing of recovered waste, contaminated soil, surface water, or other material.** **9. Ensure wastes that are incompatible with the released material are not treated, stored or disposed until cleanup is completed.** **10. Ensure that emergency equipment is clean and fit for use prior to resuming operations.** **11. Notify the department and appropriate state and local authorities before resuming operations.** **12. Submit an incident report to the department within 15 days.**	C	664.0056

Section 9: Security and General Inspection Requirements

A. Facility has EITHER of the following to prevent the unknowing entry and minimize the unauthorized entry of persons or livestock onto active portions of the site: **1. 24-hour surveillance system (guards, facility personnel, or television).** **2. Artificial or natural barriers to control entry (fence around active portions of facility) AND a means to control entry (attendants, locked entrances or controlled roadway access).** The site inspection on March 22, 2017, showed the facility lacked a 24?hour surveillance system which continuously monitors and controls entry onto the active portion of the facility, or an artificial or natural barrier (e.g., a fence in good repair), which completely surrounds the active portion of the facility and also a means to control entry, at all times, through the gates or other entrances to the active portion of the facility (e.g., an attendant, television monitors, locked entrance or controlled roadway access to the facility).	X	664.0014(2)
B. "Danger - Unauthorized Personnel Keep Out" signs are posted at entrances and other locations. The site inspection on March 22, 2017, showed the facility lacked signs with the legend, "Danger - Unauthorized Personnel Keep Out", posted at each entrance to the active portion of a facility, and at other locations, in sufficient numbers to be seen from any approach to this active portion.	X	664.0014(3)
C. Facility conducts inspections to determine if problems exist which could cause an environmental or human health hazard. The site inspection on March 22, 2017, showed that the facility does not have an inspection program for malfunctions and deterioration, operator errors and discharges, which may be causing, or may lead to, release of hazardous waste constituents to the environment or a threat to human health.	X	664.0015(1)
D. Inspections are conducted frequently enough to identify and correct problems before they harm human health or the environment. Since the facility is not in compliance with 9.C. 'NA' was selected for 9.D to 9.I.	NA	664.0015(1)
E. Facility is following a written inspection schedule for the following equipment: **1. Monitoring equipment.** **2. Safety and emergency equipment.** **3. Security devices.** **4. Operating and structural equipment.**	NA	664.0015(2)(a)
F. Facility looks for problems identified in the inspection schedule during their inspections.	NA	664.0015(2)(c)

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Section 9: Security and General Inspection Requirements

G. Problems are remedied on a schedule that ensures they do not lead to environmental or human health hazards.	**NA**	664.0015(3)
H. Written inspection log is maintained at the facility for at least 3 years.	**NA**	664.0015(4)
I. Inspection logs include ALL of the following: **1. Date and time of inspection.** **2. Name of inspector.** **3. Notation of the observations made.** **4. Date and nature of repairs or remedial actions.**	**NA**	664.0015(4)

Section 10: Personnel Training Requirements

A. Facility has a program of classroom instruction or on-the-job training for personnel in hazardous waste management. Compliance with the training requirments was based on the LQG inspection conducted on 11/15/2016.	**C**	664.0016(1)(a)
B. Program is directed by a person trained in hazardous waste management procedures.	**C**	664.0016(1)(b)
C. Program teaches facility personnel hazardous waste management procedures relevant to the positions in which they are employed.	**C**	664.0016(1)(b)
D. Training program ensures personnel are able to respond effectively to emergencies by familiarizing them with the following applicable items: **1. Contingency plan implementation.** **2. Procedures for using, inspecting, repairing, and replacing emergency and monitoring equipment.** **3. Key parameters for automatic waste feed cut-off systems.** **4. Communications and alarm systems.** **5. Response to fires or explosions.** **6. Response to groundwater contamination incidents.** **7. Shutdown of operations.**	**C**	664.0016(1)(c)
E. New employees are trained within 6 months of their assignment.	**C**	664.0016(2)
F. Employees work in supervised positions until they complete the training.	**C**	664.0016(2)
G. Personnel take part in an annual review of the training.	**C**	664.0016(3)
H. Facility keeps ALL of the following training documents: **1. Job title and the employee name for each position related to hazardous waste management.** **2. Job description of each of the above job titles.** **3. Description of the amount and type of introductory and continuing training that will be given to each employee.** **4. Records that required training has been given to each employee.**	**C**	664.0016(4)
I. Training records are maintained until closure for current personnel and at least 3 years from the date the employee last worked at the facility.	**C**	664.0016(5)

Section 11: Ignitable, Reactive or Incompatable Waste

A. Facility treats or stores ignitable, reactive or incompatible waste. If NO, go to Section 12.	**Y**	
B. Facility takes precautions to prevent accidental ignition or reaction in the following ways: **1. Separate and protect waste from sources of ignition or reaction.** **2. Confine smoking and open flame to specially designated locations.** **3. Conspicuously place "No Smoking" signs where there is a hazard from ignitable or reactive wastes.**	**C**	664.0017(1)

TREATMENT & STORAGE FACILITY INSPECTION

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Section 11: Ignitable, Reactive or Incompatable Waste

C. Facility treats, stores, or mixes ignitable, reactive, or incompatible wastes so that the waste does not result in any of the following: **1. Generate extreme heat or pressure, fire, or explosion, or violent reaction.** **2. Produce uncontrolled toxic mists, fumes, dust or gases in sufficient quantities to threaten human health.** **3. Produce uncontrolled flammable fumes or gases in sufficient quantities to pose a fire or explosion risk.** **4. Damage the structural integrity of the device or facility containing the waste.** **5. Otherwise threaten human health or the environment.**	C	664.0017(2)
D. Containers of ignitable or reactive waste are located at least 50 feet from the property line.	C	664.0176
E. Incompatible wastes are stored in separate containers unless the mixing will not generate extreme heat, fire, explosion, toxic gases or other dangers	C	664.0177(1)
F. Containers that previously held waste are washed before adding incompatible waste.	NA	664.0177(2)
G. Containers of incompatible wastes are separated or protected from each other by a physical barrier (dike, berm, wall or other device).	C	664.0177(3)

Section 12: Container Standards

A. Facility stores or treats hazardous waste in containers. If NO, go to Section 13.	Y	
B. If a container is leaking or in poor condition, the contents are transferred to another container in good condition.	C	664.0171
C. Containers are made or lined with materials that are compatible with the waste.	C	664.0172
D. Containers are kept closed, except when it is necessary to add or remove waste.	C	664.0173(1)
E. Containers are opened, handled or stored to prevent ruptures or leaks.	C	664.0173(2)
F. Container storage areas are inspected weekly for leaks and deterioration. The site inspection on March 22, 2017, showed that the 'heavies' area and the semitrailers, which are areas where hazardous waste is stored, are not inspected on a weekly basis.	X	664.0174
G. Inspections of the container storage areas are documented in an inspection log. NA was seleteced since there are no inspections are conducted.	NA	664.0015(4)
H. Base of the containment system is free of cracks and sufficiently impervious to contain leaks. The site inspection on March 22, 2017, showed that the area used to store the hazardous waste heavies consist of an unsealed and non-bermed concrete pad (i.e., no containment) and the semitrailers are stored on gravel.	X	664.0175(2)(a)
I. Waste and accumulated precipitation are removed from the sump or collection area in a timely manner to prevent overflow of the collection system. NA was seleteced since there is no containment.	NA	664.0175(2)(e)

Section 13: Subchapter AA Standards for Process Vents

A. The facility conducts distillation, fractionation, thin-film evaporation, solvent extraction, air stripping operations or steam stripping operations in units managing hazardous waste. If NO, go to Section 14.	N	
B. The facility has determined that the process vents are not subject to subch. AA by making an initial determination that the time-weighted, annual average total organic concentration of the waste managed in the above units is <10 ppmw by direct measurement of the organic concentration of the waste calculated as an arithmetic mean from 4 grab samples OR by knowledge of the waste.	NA	664.1034(4)

TREATMENT & STORAGE FACILITY INSPECTION

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Section 13: Subchapter AA Standards for Process Vents

C. If knowledge of the waste was used, the facility maintains ANY of the following: **1. Documentation showing no organic compounds are used in the process.** **2. Documentation showing that another identical process generates waste with < 10 ppmw total organic content.** **3. If based on prior analysis, documentation showing there has been no change to the process that would affect total organic concentration.** **4. Other similar documentation.**	NA	664.1034(4)
D. If the facility determined that the average total organic concentration is <10 ppmw, the determination has been made according to ALL of the following: **1. When the waste was first managed in the waste management unit or when the facility became subject to subch. AA.** **2. Annually thereafter for continuously generated waste.** **3. When there was a change in the waste managed or a change in the process generating or treating the waste.**	NA	664.1034(5)
E. The operating record includes the information used to determine that the time weighted, annual average total organic concentration managed in the waste management unit is <10 ppmw.	NA	664.1035(6)
F. The facility has determined they are not subject to subch. AA because they have certified that all process vents are equipped with air emission controls operating according to the process vent requirements in the Clean Air Act.	NA	664.1030(5)
G. All process vents are excluded from subch. AA requirements because the average total organic concentration is <10 ppmw or because the vents are equipped with air emission controls. If YES, go to Section 14.	N	
H. The total organic emissions from all process vents subject to subch. AA have been reduced to EITHER of the following: **1. Below 3 lb/hr and 3.1 tons/yr.** **2. By 95 weight percent using a control device.**	NA	664.1032(1)
I. Vent emissions and emission reductions or total organic compound concentrations are achieved by add-on control devices that are based on engineering calculations or performance tests.	NA	664.1032(3)
J. When knowledge of the waste or process is used to determine if the process vent is subject to subch. AA standards, the operating log includes ALL of the following information which is based on engineering calculations or performance tests: **1. Vent emissions.** **2. Emission reduction rates.** **3. Total organic compound concentrations achieved by add-on control devices.**	NA	664.1035(6)
K. The facility uses a closed-vent system and control device to reduce total organic emissions. If YES, complete the inspection form, "TSD Subch. AA & BB Standards for Closed Vent Systems and Control Devices".	NA	

Section 14: Subchapter BB Standards for Equipment Leaks

A. The facility operates any of the following equipment that contains or contacts hazardous wastes with organic concentrations >=10% by weight. If NO, go to Section 15. **1. Pumps in light liquid service.** **2. Compressors.** **3. Pressure relief devices in gas or vapor service.** **4. Sampling connection systems.** **5. Open-ended valves or lines.** **6. Valves in gas or vapor service or in light liquid service.** **7. Pumps or valves in heavy liquid service** **8. Pressure relief devices in light liquid or heavy liquid service.** **9. Flanges or other connectors.**	N	
B. The equipment listed in Question 14.A is excluded from subch. BB requirements because it is in vacuum service and individually listed in the facility operating record by an identification number (NR 664.1064(7)(e)).	NA	664.1050(5)
C. The equipment listed in Question 14.A is excluded from subch. BB requirements because it operates < 300 hours per calendar year AND is identified, either by list or location (area or group), in the facility operating record.	NA	664.1050(6)

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Section 14: Subchapter BB Standards for Equipment Leaks

D. If the facility determines compliance with subch. BB by documenting compliance with the Clean Air Act requirements, the documentation is readily available as part of the operating record.	NA	664.1064(13)
E. The following information used to determine the applicability of the exclusions in Questions 14.A - 14.D is recorded in the operating log: 1. Analysis determining the design capacity of the hazardous waste management unit. 2. Statement listing the hazardous waste influent to and effluent from each hazardous waste management unit subject to subch. BB and an analysis determining whether these hazardous wastes are heavy liquids. 3. Up-to-date analysis and the supporting information used to determine whether or not equipment is subject to subch. BB.	NA	664.1064(11)
F. When knowledge of the nature of the hazardous waste stream or the process by which it was produced is used to determine the applicability of the exclusions, supporting documentation such as the following is recorded in the operating log: 1. Information that the production process does not use organic compounds. 2. The process is identical to a process at another facility where the total organic content was measured at <10% 3. The process has not changed to affect the total organic concentration of the waste.	NA	664.1064(11)
G. The operating log includes new determinations which are performed when changes could result in an increase in the total organic content of the waste in contact with equipment determined not to be subject to subch. BB requirements.	NA	664.1064(11)
H. All of the equipment listed in Question 14.A is excluded from additional subch. BB requirements. If NO, complete the TSD subch. BB inspection form.	N	

Section 15: Subchapter CC Level 1 Standards for Containers

A. The facility manages hazardous waste in containers with EITHER of the following design capacities. If NO, go to Question 15.V (NR 664.1086(2)(a)). 1. Between 26 and 119 gallons. 2. Greater than 119 gallons that are not in light material service.	Y	
B. Containers are exempt from subch. CC because of ALL of the following (NR 664.1083(1), NR 664.1082(3)(a)): 1. The average VO concentration at the point of origination is <500 ppmw for all hazardous waste entering the container. 2. The initial determination of the average VO concentration for the waste stream was made before the material was placed in the container. 3. The initial determination is reviewed and updated at least once every 12 months. 4. A new waste determination is performed whenever changes to the source generating the waste stream likely causes the average VO concentration to increase to 500 ppmw. 5. The average VO concentration is determined by direct measurement or by knowledge. Note: See NR 665.1084(1)(c) for direct measurement procedures and NR 665.1084(1)(d) for using knowledge.	N	
C. For each waste determination, the date, time, and location of each waste sample collected are maintained in the facility records.	NI	664.1089(6)(a)
D. Containers are exempt from subch. CC because of EITHER of the following (NR 664.1082(3)): 1. The organic content of all waste entering the container has been reduced by an organic destruction or removal process described in NR 664.1082(3). 2. The hazardous organic constituents of the waste placed in the container have been treated to meet LDR standards.	N	
E. Containers are excluded from subch. CC because they are used to store or treat hazardous waste from organic peroxide manufacturing processes (NR 664.1080(4)). Note: Certain records must be maintained. Refer to NR 664.1089(9) for more information.	NA	
F. Containers are excluded from subch. CC because they are used solely to store or treat EITHER of the following (NR 664.1080(2)): 1. On-site remediation wastes generated through NR 700 or RCRA corrective action activities. 2. Radioactive mixed wastes in accordance with NRC requirements.	N	

TREATMENT & STORAGE FACILITY INSPECTION

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Section 15: Subchapter CC Level 1 Standards for Containers

G. Containers are excluded from subchapter CC because of BOTH of the following (NR 664.1080(2), NR 664.1089(10)): **1. They are equipped with air emission controls operated in accordance with the Clean Air Act requirements.** **2. Facility records include a certification of such by the owner or operator and the specific air program compliance requirements for the containers .**	**N**	
H. All containers managed at the facility are excluded from subch. CC level 1 requirements. If YES, go to Question 15.V.	**N**	
I. Any of the following controls are used on all Level 1 containers subject to subch. CC: **1. Container meets applicable US DOT packaging requirements.** **2. A cover and closure devices form a continuous barrier over the container openings such that when they are secured, there are no visible holes, gaps or other open spaces into the container.** **3. An organic-vapor suppressing barrier is placed on or over the hazardous waste in an open-top container so that the hazardous waste is not exposed to the atmosphere.** **Note: Level 1 standards do not apply to satellite accumulation or RCRA empty containers.**	**C**	664.1086(3)(a)
J. Level 1 containers that do not meet applicable US DOT packaging requirements are equipped with covers and closure devices composed of suitable materials that result in BOTH of the following: **1. Minimize exposure of hazardous waste to the atmosphere.** **2. Maintain integrity of the covers and closure devices.**	**C**	664.1086(3)(b)
K. If a Level 1 container is filled to the final level in one continuous operation, the closure device is promptly secured in the closed position when the filling operation is concluded.	**NA**	664.1086(3)(c)
L. If a Level 1 container is batch filled, the closure device is promptly secured in a closed position when the container is filled to the intended final level OR the batch loading is completed and any of the following first occurs: **1. No additional material will be added within 15 minutes.** **2. The person performing the loading operation leaves the immediate vicinity of the container.** **3. The process generating the waste shuts down.**	**NA**	664.1086(3)(c)
M. If Level 1 containers are opened to remove hazardous waste, the closure device is secured in the closed position upon completion of a batch removal AND when either of the following first occurs: **1. No additional materials will be removed within 15 minutes.** **2. The person removing the waste leaves the immediate vicinity of the container.**	**NA**	664.1086(3)(c)
N. If access to the inside of a Level 1 container is needed to perform routine activities other than the transfer of hazardous waste (e.g., sampling), the closure device is secured in the closed position promptly after completing the activity.	**NA**	664.1086(3)(c)
O. If a Level 1 container is equipped with a pressure relief device that vents to the atmosphere, ALL of the following conditions are met: **1. The device is designed to operate with no detectable organic emissions (< 500 ppmv) when in the closed position.** **2. The device is closed when the internal pressure is within the specified operating range.** **____ The device opens and vents to the atmosphere only for the purpose of maintaining internal pressure according to the design specifications.**	**NA**	664.1086(3)(c)
P. Safety valves are only opened to avoid an unsafe condition.	**NA**	664.1086(3)(c)
Q. When first taking possession of a Level 1 container that will not be emptied within 24 hours, the facility visually inspects the container, cover and closure device for visible cracks, holes, gaps or other open spaces on or before the date the facility accepts the container (e.g., signs the manifest). The site inspection on March 22, 2017, showed that the 'heavies' area and the semitrailers, which are areas where hazardous waste is stored, are not inspected on a weekly basis.	**X**	664.1086(3)(d)
R. If a Level 1 container remains at the facility for one year or more, the container, its cover and closure devices are visually inspected initially and at least once every 12 months for cracks, gaps or other open spaces.	**NA**	664.1086(3)(d)
S. When a defect is detected, initial repair efforts are made within 24 hours of detection and completed within 5 calendar days.	**NI**	664.1086(3)(d)
T. If repairs cannot be completed in 5 days, the waste is removed from the container which is not used until it is repaired.	**NI**	664.1086(3)(d)

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Section 15: Subchapter CC Level 1 Standards for Containers

U. Inspections records for subchapter CC containers are maintained in the operating log for at least 3 years.	NI	664.0015(2)(d)
V. If a facility managed hazardous waste with an average VO concentration >500 ppmw or without adequate reduction of the organic content by an organic destruction or removal process in a container exempt from subch. CC level 1, 2 or 3 standards, the facility submitted a written report to the department which includes all of the following information: 1. Name of the facility, EPA ID#, and address. 2. A description of the noncompliance event and the cause. 3. The dates of noncompliance. 4. The actions taken to correct the noncompliance and prevent reoccurrence.	NA	664.1090(1)
W. The report in Question 15.W is submitted within 15 calendar days of the time the owner or operator becomes aware of the occurrence.	NA	664.1090(1)

Section 16: Subchapter CC Level 2 Standards for Containers

A. The facility manages hazardous waste containers with a design capacity >119 gallons that are in light material service. If NO, go to Section 17.	N	
B. Any of the following controls are used on Level 2 containers: 1. Container meets applicable US DOT packaging requirements. 2. Each potential leak interface where organic vapor leakage could occur on the container, cover and closure device has been checked to determine that no detectable organic emissions (< 500 ppmv) are occurring. 3. The facility has demonstrated within the last 12 months that the containers are vapor-tight using Method 27 in appendix A of 40 CFR part 60.	NA	665.1087(4)(a)
C. If the container is vented inside an enclosure, the enclosure is operated according to the criteria for permanent total enclosures found in Method 204 in appendix M of 40 CFR part 51.	NA	665.1087(5)(b)1
D. If the potential leak interface on the containers were checked, BOTH of the following were met: 1. Checks were made on the interface of the cover rim and the container wall; the periphery of any opening on the container or container cover and its associated closure device; and, the sealing seat interface on a spring-loaded, pressure-relief valve. 2. The test was performed when the container was filled with a material having a VO concentration representative of the hazardous waste expected to be stored in the container.	NA	665.1087(4)(a)
E. The facility maintains a copy of the procedure used to determine that containers >119 gallons in size that do not meet DOT requirements are not managing hazardous waste in light material service.	NA	665.1087(3)(e)
F. Level 2 controls are used when transferring waste in or out of the container that minimize exposure to the atmosphere (submerged-fill pipe, vapor-recovery system, etc.) to the extent practical, considering the physical properties of the hazardous waste and good engineering and safety practices.	NA	665.1087(4)(b)
G. If the container is filled to the final level in one continuous operation, the closure devices are promptly secured in the closed position when the filling operation is concluded.	NA	665.1087(4)(c)1.a
H. If the container is batch filled, the closure devices are promptly secured in a closed position upon filling the container to the intended final level, or when the batch loading is completed and ANY of the following first occurs: 1. No additional material will be added within 15 minutes. 2. The person performing the loading operation leaves the immediate vicinity of the container. 3. The process generating the waste shuts down.	NA	665.1087(4)(c)1.b
I. If containers are opened to remove hazardous waste, closure devices are secured in the closed position upon completion of a batch removal and either of the following first occurs: 1. No additional materials will be removed within 15 minutes. 2. The person removing the waste leaves the immediate vicinity of the container.	NA	665.1087(4)(c)2.b
J. If access to the inside of the container is needed to perform routine activities other than the transfer of hazardous waste (e.g., sampling), the closure device is secured in the closed position promptly after completing the activity.	NA	665.1087(4)(c)3

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Section 16: Subchapter CC Level 2 Standards for Containers

K. If the container is equipped with a pressure relief device that vents to the atmosphere, the device meets ALL of the following conditions: **1. Designed to operate with no detectable organic emissions when in the closed position.** **2. Closed when the internal pressure is within the specified operating range.** **3. Opens and vents to the atmosphere only for the purpose of maintaining internal pressure according to the design specifications.**	NA	665.1087(4)(c)4
L. Safety valves are only opened to avoid an unsafe condition.	NA	665.1087(4)(c)5
M. When a defect is detected, initial repair efforts are made within 24 hours of detection.	NA	665.1087(4)(d)3
N. Repairs are completed within 5 days, or the waste is removed from the container which is not used until the defect is repaired.	NA	665.1087(4)(d)3

Section 17: Subchapter CC Level 3 Standards for Containers

A. The facility manages hazardous waste in containers having a design capacity >26 gallons during a waste stabilization process when hazardous waste is exposed to the atmosphere. If NO, go to Section 18.	Y	
B. The container is vented directly through a closed-vent system to a control device, or the container is vented inside an enclosure which is exhausted through a closed-vent system to a control device.	NA	665.1087(5)(a)
C. If the container is vented inside an enclosure, the enclosure is operated according to the criteria for permanent total enclosures found in Method 204 in appendix M of 40 CFR part 51.	NA	665.1087(5)(b)1
D. Records for the most recent set of calculations and measurements verifying the enclosure meets the criteria for a permanent total enclosure in Method 204 in appendix M of 40 CFR part 51 are maintained at the facility.	NA	665.1090(4)(a)
E. Level 3 controls are used when wastes are transferred in or out of the container that minimize exposure to the atmosphere (e.g., submerged-fill pipe, vapor-recovery system, etc.) to the extent practical, considering the physical properties of the hazardous waste and good engineering and safety practices.	NA	665.1087(5)(f)

Section 18: Financial Responsibility

A. The facility maintains the following proof mechanism for closure: **1. Closure trust fund** **5. Net worth test** **2. Surety bond** **6. Deposit with the department** **3. Letter of credit** **7. Escrow account** **4. Insurance** **8. Multiple financial mechanisms** A record review on March 28, 2017, showed that MASD does not have financial responsibility for closure of the facility using a financial assurance mechanism that is acceptable to the department	X	664.0143
B. The facility complies with EITHER of the following: **1. The amount of the proof mechanism being maintained is adequate to cover the most recent closure cost estimate.** **2. The facility is taking steps to increase the financial assurance to cover the closure costs within 60 days of a cost increase.** NA was selected since the faclity does not have financial responsibility for closure.	NA	664.0143
C. The facility has the following type of liability coverage for sudden accidental occurrences: **1. Insurance** **5. Surety bond** **2. Financial test** **6. Trust fund** **3. Guarantee** **7. Multiple financial mechanisms** **4. Letter of credit**	NI	664.0147(1)
D. Indicate the date of the most recent financial review done by the Department.		
E. The Department found that the financial responsibility for closure and liability coverage was adequate during the most recent financial review. NA was selected because the depetment has never review the falcity for closure.	NA	

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Section 19: License Requirements

A. Facility is in compliance with the conditions of their license. Facility has no license, so NA was selected for 19.A to 19.C	NA	670.032
B. Facility has not exceeded capacity limits for storage or treatment units.	NA	670.032
C. Facility notified the Department or requested a modification to their license, as required, for any changes at the facility.	NA	670.042

Section 20: Waste Minimization

A. Facility has a program to reduce the volume and toxicity of hazardous waste generated to the greatest economical degree possible. The site inspection on March 22, 2017, showed that there is no written waste minimization program and a record review on March 28, 2017, showed that the department has not received from MASD the annual certification for waste minimization.	X	664.0073(2)(i)
B. A waste minimization certification is signed at least annually and is maintained in the facility's operating record.	X	664.0073(2)(i)
C. Facility includes waste minimization information in its annual report. NA was selected since the facility does not have a waste minimization plan..	NA	664.0075

Section 21: Used Oil

A. Used oil is managed on-site. If NO, go to Section 22	Y	
B. Used oil containing >= 1,000 ppm halogens is managed as listed hazardous waste or the rebuttable presumption requirements have been met.	NA	679.10(2)(a)2
C. Used oil containers and tanks are in good condition and not leaking.	C	679.22(2)
D. Used oil containers and tanks are marked "used oil".	C	679.22(3)(a)
E. Transporter has an EPA ID number, except when generator self-transports or has a tolling arrangement.	NA	679.24
F. If oil containing materials are disposed of as a solid waste, the used oil has been properly drained so there is no visible sign of free-flowing oil and a waste determination has been properly made.	NA	679.10(3)(a)
G. If used oil is burned in an on-site used oil-fired space heater, all of the following are met: **1. Only used oil from the generator or household do-it-yourselfers is burned.** **2. The heater is designed with a maximum capacity of 0.5 million BTU per hour or less.** **3. The combustion gases are vented to the ambient air.**	NA	679.23
H. If used oil is accepted from others or sent off-site to be burned in a space heater, the used oil meets fuel specifications and the marketer requirements in NR 679 subch. H are met.	NA	679.11

Section 22: Universal Waste

A. The facility is a small quantity handler of universal waste (never accumulates more than 11,025 lbs). If NO, state in the comments section if the facility is a universal waste nonhandler, large handler or destination facility, and go to Section 23. **Note: If the facility is a large handler, complete the large quantity handler of universal waste inspection form.**	Y	

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Section 22: Universal Waste

B. Universal waste has not been disposed, treated or diluted. **Note: Dilution or treatment does not include: sorting, mixing, discharging, regenerating, or disassembling batteries; removing batteries from consumer products or removing electrolytes; removing thermostat ampules; or, responding to a release of universal waste.**	C	673.11
C. Universal waste batteries and thermostats that are broken or show evidence of leakage or spillage are placed in closed, structurally sound containers that are compatible with the waste and not leaking.	C	673.13
D. Universal waste lamps and pesticides are placed in closed, structurally sound containers that are compatible with the waste and are not leaking.	NA	673.13
E. All universal wastes are labeled or marked "Waste" or "Used" followed by the specific type of universal waste handled or "Universal Waste".	C	673.14
F. Universal waste is accumulated for less than one year from the date generated or received from another handler.	C	673.15(1)
G. If universal waste is accumulated beyond one year, the handler can prove that accumulation was necessary to facilitate proper recovery, treatment or disposal.	C	673.15(2)
H Length of accumulation time is demonstrated by any of the following: **1. Each container is marked or labeled with the earliest date the waste is generated or received.** **2. The individual item of waste is marked or labeled with the date it was generated or received.** **3. An inventory system identifying the date the waste was generated or received is maintained.** **4. The universal waste is placed in a specific accumulation area identified with the earliest date the waste was generated or received.**	C	673.15(3)
i. Employees are trained on the proper handling and emergency procedures appropriate to the types of waste handled at the facility.	C	673.16
J. ALL of the following are met when a release occurs: **1. Release is immediately contained.** **2. A waste determination is made.** **3. Spill residue is disposed of properly as solid or hazardous waste.**	C	673.17
K. Handler sends the waste to a destination facility, foreign destination or another handler. Indicate the facilities in the comments section.	C	673.18(1)
L. For hazardous materials, the handler packages, labels, marks, placards and prepares the proper shipping papers in accordance with DOT requirements in 49 CFR parts 172 to 180.	NA	673.18(3)
M. The following activities have occurred. If YES, complete the Universal Waste Small Quantity Handler inspection form. **1. Universal waste are sorted or disassembled.** **2. Recalled pesticides are managed.** **3. Universal waste shipments have been rejected.** **4. Universal waste shipments have included hazardous or solid waste.** **5. Universal waste is self-transported.**	N	

Section 23: Facility Status Evaluation

A. Describe any other activities the facility is conducting.

During the site inspection on March 22, 2017, it was learned that MASD receives approximately 1,700 drums per day by semitrailers. These semitrailer loads typically contain non-RCRA empty drums, which contain hazardous waste. These semitrailer loads are delivered to MASD's St. Frances facility located at 3950 S Pennsylvania Ave, St. Frances, WI 53235. These semitrailers are owned and operated by MASD. A record review on March 28, 2017, showed that MASD does not have an active hazardous waste transportation license.

Key : C: Compliance CA: Compliance with Concern R: Returned to Compliance X: Non-Compliance NA: Not Applicable ND: Not Determined NI: Not Inspecte
Y: Yes N: No UN: Unknown Revision : 07/21/2016

Notes : 1. * Dept. approved alternate may apply 2. Questions without a status entry use narrative responses

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SITE PHOTOS

Photo # 47367 | Photo 1 of 23

Photo Date & Time 03/22/2017 00:00

Photo Direction S

Photographer BAERWALD, CATHERINE

Photo Description

Close up of drum in heavy area.

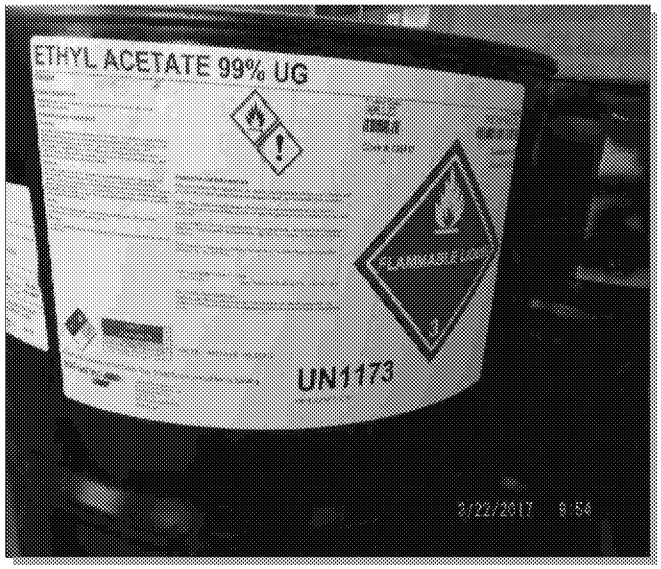


Photo # 47368 | Photo 2 of 23

Photo Date & Time 03/22/2017 00:00

Photo Direction S

Photographer BAERWALD, CATHERINE

Photo Description

Close up of label in heavy drum area.

Photo # 47369 | Photo 3 of 23

Photo Date & Time 03/22/2017 00:00

Photo Direction SE

Photographer BAERWALD, CATHERINE

Photo Description

View of heavy drum area.

SITE PHOTOS

Photo # 47370 | Photo 4 of 23

Photo Date & Time: 03/22/2017 00:00

Photo Direction: S

Photographer: BAERWALD, CATHERINE

Photo Description

Close up of hazardous waste label and flammable liquid sticker in heavy drum area.

Photo # 47371 | Photo 5 of 23

Photo Date & Time: 03/22/2017 00:00

Photo Direction: SW

Photographer: BAERWALD, CATHERINE

Photo Description

View of hazardous waste label in heavy drum area.

Photo # 47372 | Photo 6 of 23

Photo Date & Time: 03/22/2017 00:00

Photo Direction: S

Photographer: BAERWALD, CATHERINE

Photo Description

Flammable sticker on heavy drum.

SITE PHOTOS

Photo # 47373 | Photo 7 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction S
Photographer BAERWALD, CATHERINE

Photo Description

Hazardous waste label in heavy drum area. The label reads that the drum contained paint line flush.

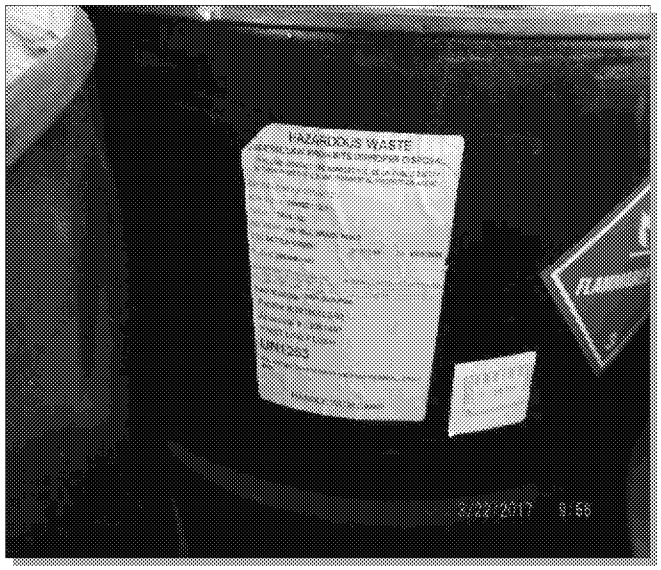


Photo # 47374 | Photo 8 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction SW
Photographer BAERWALD, CATHERINE

Photo Description

View of sticker that facility puts on heavy drums. Sticker gives customers of heavy drum a batch number and identifies how many heavy drums are in the batch.

Photo # 47375 | Photo 9 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction S
Photographer BAERWALD, CATHERINE

Photo Description

View of label in heavy drum area.

SITE PHOTOS

Photo # 47376 | Photo 10 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction S
Photographer BAERWALD, CATHERINE

Photo Description
Drum in heavy drum area.

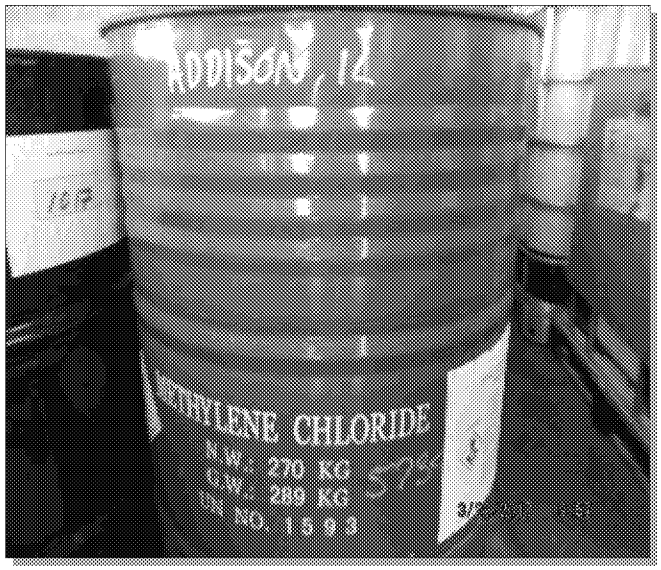


Photo # 47377 | Photo 11 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction INSIDE
Photographer BAERWALD, CATHERINE

Photo Description
Photo of "Rejected" stickers put on drum by facility. Date received is 3/14/17.

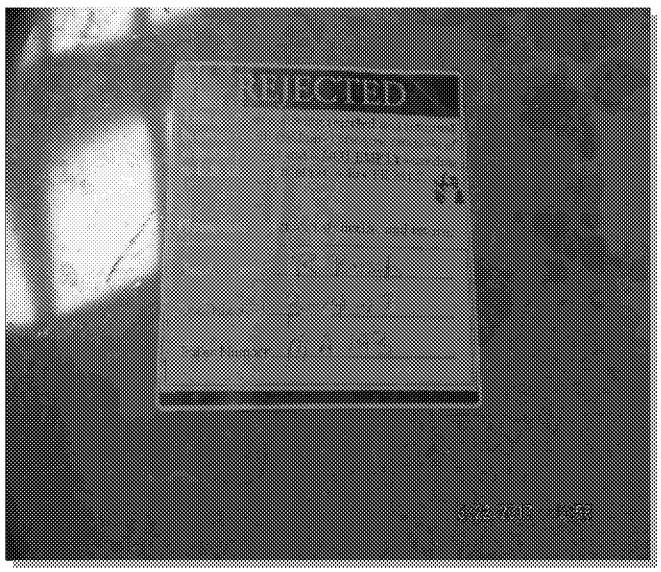
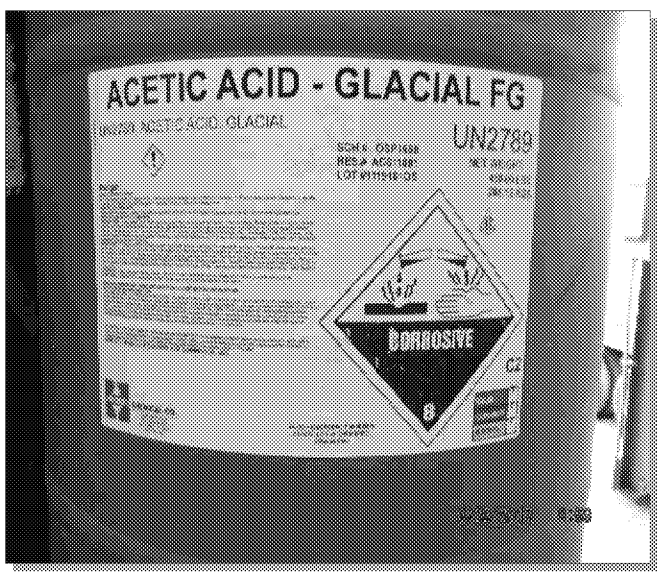


Photo # 47378 | Photo 12 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction INSIDE
Photographer BAERWALD, CATHERINE

Photo Description
View of incoming drum on steel drum dock.



SITE PHOTOS

Photo # 47379 | Photo 13 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction INSIDE
Photographer BAERWALD, CATHERINE
Photo Description
Label of incoming drum on steel drum dock.

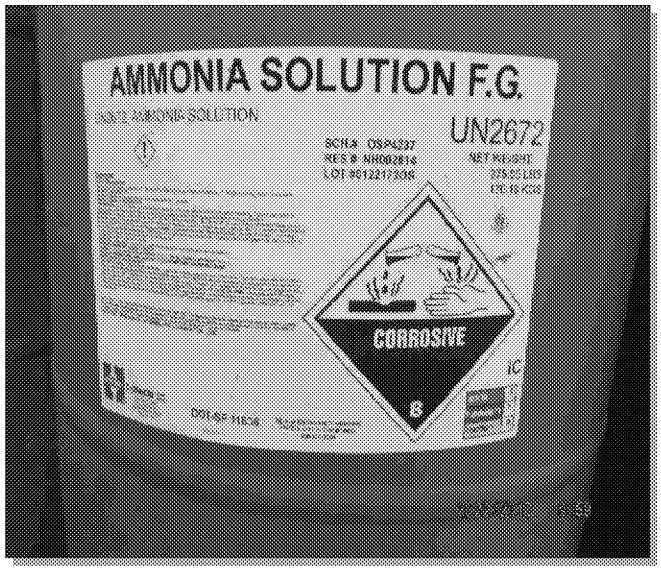


Photo # 47380 | Photo 14 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction INSIDE
Photographer BAERWALD, CATHERINE
Photo Description
Incoming drum on steel drum dock.

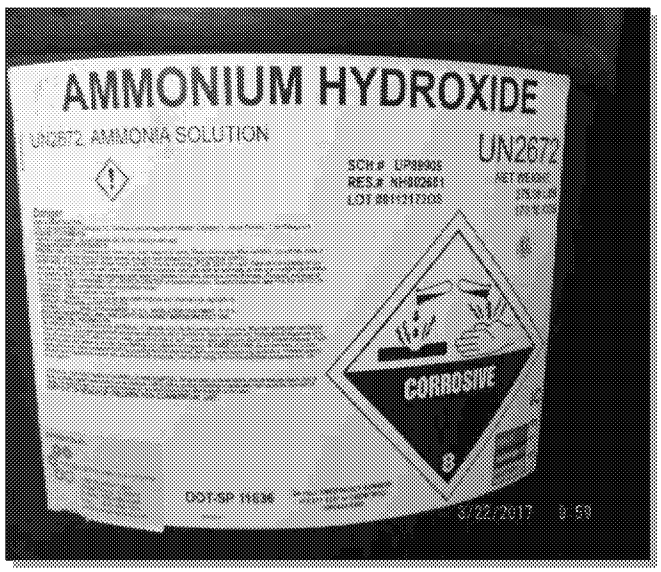


Photo # 47381 | Photo 15 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction INSIDE
Photographer BAERWALD, CATHERINE
Photo Description
Drum label of incoming drum to facility on steel drum dock.

SITE PHOTOS

Photo # 47382 | Photo 16 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction INSIDE
Photographer BAERWALD, CATHERINE
Photo Description
Label on incoming drum on steel drum dock.

Photo # 47383 | Photo 17 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction S
Photographer BAERWALD, CATHERINE
Photo Description
Label on drum on steel drum dock.

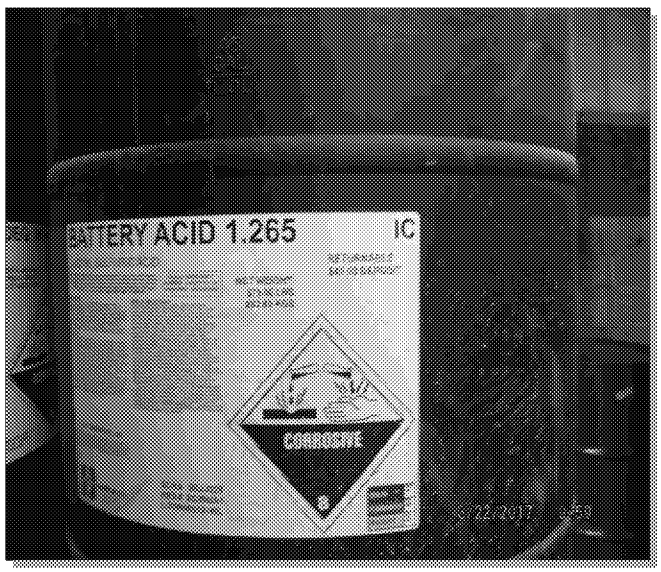


Photo # 47384 | Photo 18 of 23
Photo Date & Time 03/22/2017 00:00
Photo Direction E
Photographer BAERWALD, CATHERINE
Photo Description
View of steel drum dock.

SITE PHOTOS

Photo # 47385 | Photo 19 of 23

Photo Date & Time: 03/22/2017 00:00

Photo Direction: E

Photographer: BAERWALD, CATHERINE

Photo Description

Overview of steel drum dock. Heavy drum area is located to the east.

Photo # 47386 | Photo 20 of 23

Photo Date & Time: 03/22/2017 00:00

Photo Direction: INSIDE

Photographer: BAERWALD, CATHERINE

Photo Description

Label on waste that facility deems nonhazardous such as wastewater sludge and wash water tank cleanout.

Photo # 47387 | Photo 21 of 23

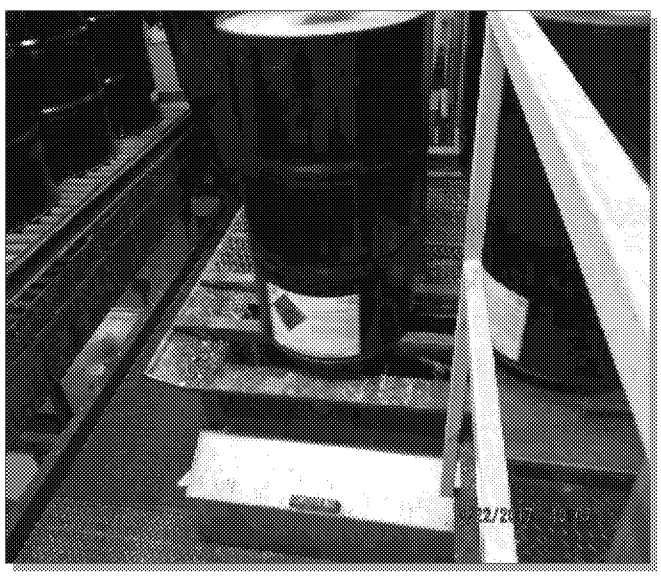
Photo Date & Time: 03/22/2017 00:00

Photo Direction: INSIDE

Photographer: BAERWALD, CATHERINE

Photo Description

View of inverted drum on steel drum wash line.



SITE PHOTOS

Photo # 47388 Photo 22 of 23

Photo Date & Time 03/22/2017 00:00

Photo Direction INSIDE

Photographer BAERWALD, CATHERINE

Photo Description

Inverted drum on steel drum wash line. Drum contained "Hydrite Blend" according to the label and is flammable.

Photo # 47389 Photo 23 of 23

Photo Date & Time 03/22/2017 00:00

Photo Direction INSIDE

Photographer BAERWALD, CATHERINE

Photo Description

Close up drum inverted on the steel drum wash line. Drum label contents read "Methyl Amyl" and last word was smeared. There is a flammable liquid label on drum.

State of Wisconsin
Department of Natural Resources

Form 4430-5 (R. 03/06)

COMPLIANCE MONITORING AND EVALUATION FORM

A. GENERAL INFORMATION

FIST SEQ #: 59055

Facility Name (current)	FID #	EPA ID #	Case #	Complaint #
CONTAINER LIFE CYCLE MANAGEMENT-MILWAUKEE	241492460	WIR000162438	59055	

Street/Location	Notification Status
2300 W CORNELL ST	HW GENERATOR - SMALL

City	Zip Code	County	Type of Contact	Contact Date/Time
MILWAUKEE	53209-	MILWAUKEE	FIELD	03/22/2017 12:25

Contact Name/Phone Number		Staff Assigned to Site	Case Close Out Date
KEVIN MEYER, PLANT MGR	(414) 762-1114	BAERWALD, CATHERINE	

B. FACILITY INSPECTED AS

Inspection Type
HW GENERATOR - SMALL

C. NOTIFICATION CHANGE

Date processed SHWIMS_____, EPA Data System_____

Status Change: Field Verified Status Is _____

Name Change: Former Name _____

D. ACTIVITY TYPES

Lic/RU/RA	Staff Person	Lead Program	Activity Type
	ELLENBECKER, MICHAEL J	HAZARDOUS WASTE	OTHER
	BAERWALD, CATHERINE M	HAZARDOUS WASTE	ASSIST LEAD STAFF

E. ACTIONS AND VIOLATIONS

Action Date	Action Type	Close Date	SNC	Comments
	NON			

Viol. Type	Action Type	Violation Discovery Date	Action Date	Response Due Date	Actual Compliance Date	Viol. Status Code	Code or Statute Citation	Code or Statute Description
	NON	03/22/2017				X	664.0013(1)(a)	Detailed chemical and physical analysis
	NON	03/22/2017				X	662.011	Hazardous waste determination
	NON	03/22/2017				X	668.03	Prohibition against dilution of wastes
	NON	03/22/2017				X	664.0073(2)	Operating record
	NON	03/22/2017				X	664.0075	Annual reports to Dept by March 1
	NON	03/22/2017				X	664.0076	Unmanifested waste report within 15 days
	NON	03/22/2017				X	664.0051	Written contingency plan
	NON	03/22/2017				X	664.0014(3)	Signs posted
	NON	03/22/2017				X	664.0015(1)	Inspections conducted frequently enough
	NON	03/22/2017				X	664.0174	Container storage areas inspected weekly
	NON	03/22/2017				X	664.0175(2)(a)	Containment system integrity
	NON	03/22/2017				X	664.0072(4)(a)	Impossible to forward
	NON	03/22/2017				X	664.0143	Proof mechanism for closure
	NON	03/22/2017				X	664.0073(2)(i)	Reduce the volume and toxicity
	NON	03/22/2017				X	664.0073(2)(i)	Reduce the volume and toxicity
	NON	03/22/2017				X	670.001(3)	Treatment of a HW without licence
	NON	03/22/2017				X	668.50(1)(b)	Each container marked with start date
	NON	03/22/2017				X	662.011(3)	Waste determination been made correctly
	NON	03/22/2017				X	662.040(3)	Records of waste determinations 3 years

Region Signature(s) BAERWALD, CATHERINE

Date Signed

Viol. Type	Action Type	Violation Discovery Date	Action Date	Response Due Date	Actual Compliance Date	Viol. Status Code	Code or Statute Citation	Code or Statute Description
	NON	03/22/2017				X	664.0016(4)	Training is documented
	NON	03/22/2017				X	665.1087(4)(b)	665.1087(4)(b) / 665.1087(4)(b)
	NON	03/22/2017				X	670.001(3)	Storage of HW without licence
	NON	03/22/2017				X	663.13	Transportation of a HW without licen
	NON	03/22/2017				X	663.20	Obtain from the generator manifest

G. COMMENTS

SITE NARRATIVE

Narrative:

CASE ACTIVITY REPORT
Form 4100-182 9-99State of Wisconsin
Department of Natural Resources

Case Number

59055
Case Title

Container Life Cycle Management, LLC

Activity

Milwaukee / Cornell Street Facility - Compliance Evaluation Inspection Narrative
Date of Activity

March 22, 2017

EPA ID#: WIR000162438
FID#: 241492460
Address: 2300 West Cornell Street, Milwaukee, WI

On March 22, 2017 at approximately 12:25 p.m., Waste Management Specialist Catherine Baerwald and DNR Hazardous Waste Program Coordinator Mike Ellenbecker arrived at Container Life Cycle Management, LLC (CLCM) located at 2300 West Cornell Street in Milwaukee. After being let into a gated area, Baerwald and Ellenbecker entered a doorway. The two were met by Rodney Knash who led them into an office. After a brief time, Kevin Meyer, Plant Manager, arrived and walked Baerwald and Ellenbecker to a break room. Steele Johns, Environmental Health and Safety Manager for Greif and Linda Benfield of Foley and Lardner LLC arrived shortly after that. Earlier that day, an inspection was scheduled for the Cornell Street location to take place at 12:30 p.m. Photos were allowed and copies were made available to the facility. Hearing protection, hard hats, vests, safety glasses and steel toe shoes were worn. Meyer is the Plant Manager for the Cornell Street facility. The Cornell Street location accepts totes from the CLCM-Oak Creek and CLCM-St Francis, arriving at one of two truck bays. Trailers are unloaded right away and no trailers are stored on-site. Meyer stated that the location accepts as little as 20 totes to as many as 180 totes a day. Once the truck is unloaded, totes can be either stored inside or some totes will be stored outside to the west of the building. The facility cleans approximately 60 totes a day, according to Meyer. Totes are comprised of steel carbon, stainless steel, and poly; some are specific to the customer. There are two types of poly totes: caged or soft wall style and rigid wall or rock which are not caged and can stand alone. The majority of totes that arrive at the facility come directly from the customer and are the caged polys

Once the totes are inside the facility, Knash designates the totes as either heavy or empty (the empty totes may still contain residual material). According to Meyer, an empty tote is evaluated by Knash to determine if the tote contains residual hazardous or nonhazardous materials. Knash makes this determination by looking at the label or uses prior knowledge. If the label indicates the material inside is caustic, an oxidizer, flammable, or the tote contains no label it is considered a hazardous tote. All of the totes will be placed on the east side of the wash process area. This area can hold 30 totes. The nonhazardous totes are vacuumed out in groups of five and the waste is placed into a collection tote located by the east wall. The waste is disposed of through Covanta. Five to six gallons of water is added to the hazardous totes and then gravity drained into a comingled 275 gallon collection tote. Next, all the totes are pressure washed to remove labels and dirt in an area north of where the vacuuming takes place. The waste water generated from the pressure washing step is the only water from the system to go into the sanitary sewer. The totes are then cleaned in three stages: prewash, a wash and rinse (located at the same spot), and dry. The totes are carried by a forklift and placed in groups of five. The totes are then placed on roller conveyor and prewashed. A nozzle is placed into each tote and sprays with 360 p.s.i of hot water the bottom eight inches of the tote so waste material will not pass into the water during the wash step. The valve on the bottom of the tote is open and the water drains out and reused in the prewash tank. Original prewash water comes from the city's water supply and fed into a tank, when no longer usable it is pumped out. The tote then goes to the wash and rinse stage. A nozzle with a 360 degree wand called a gamma jet will go into each individual tote. It will jet spray at 390 p.s.i. every square centimeter so the inside area is covered. The water will drain and go into the initial heat wash tank. Rinse water will go into the wash tank if needed. Nozzles are swapped and the rinse will proceed for five minutes with 170 degree water from a cleaner tank. Water is drained and pumped to the rinse water tank. The conveyor continues on an incline to get all the water out of the tote while a four inch hose heats the inside so it will dry the tote and leave no humidity inside. Totes are fork lifted and stacked three high in preparation of the tote's inspection. The inspection is done in groups of five totes and includes cleaning valves with acetone and inspecting all corners and six sides of each of the totes. The totes are examined for weak spots or dents. They have to pass a DOT pressure hold test (three p.s.i. for approximately one minute) to be recertified. Totes go through final labeling which includes adhering metal plates on four or two sides (located on either side of the valves). The majority of tote customers use two sided plates. Totes are then stored until the customer requests them. The life span of a tote usually last approximately 2.5 years. If it is determined that a tote is unusable, they are sent out to be scrapped. Meyer referenced the standard work rule at CLCM, which is called the Job Safety Analysis or JSA when speaking of the processes.

A tour of the facility began with Baerwald, Ellenbecker, Benfield, Meyer, and Johns. The first area toured was where the totes are processed (either vacuuming or inside rinse to remove residual material). A tote was observed that is used for collection of material after the vacuuming out of nonhazardous totes. The table was seen where hazardous totes are placed for drainage into the same tote as the nonhazardous matter. This collection tote is tested and then determined to either be nonhazardous or hazardous by the facility. Next, an employee was actively power washing totes in that area at the time of the inspection. The totes were then delivered to the washing and rinsing conveyor system and made their way on an incline to be dried. Totes were then stacked west of the area and two employees were

rinsing conveyor system and made their way on an incline to be dried. Totes were then stacked west of the area and two employees were also inspecting and cleaning the outside of the totes.

The inspection made its way passed the loading area and west of the tote processing where the heavy totes were located. Baerwald asked how heavy totes are determined. Meyer stated when a tote comes off a truck you can see from the outside if there is material inside. If a tote contains material or if it is hard to see through, it is placed in the heavy area. There were two heavy totes in this area. One caged poly tote had a label that read "lauric acid 95%". The other steel tote was labeled "acetone" and was designated "flammable". The tote labeled as "acetone" is likely a D001 hazardous waste.

There were many totes stored in the facility that were already cleaned and totes that needed to be processed were also observed. According to Meyer, a backlog of totes needing to be cleaned can occur because the facility can only process 30 to 60 totes a day and the facility may receive 180 totes a day. These totes waiting to be processed might be stored approximately 30 days.

Baerwald observed oil totes and asked about the cleaning process. Oil totes consist of steel and will be cleaned on the same line as the chemical totes. Meyer specified that the number of oil totes is nominal to the chemical totes and that ninety percent of totes contain nonhazardous materials.

Back in the break room, discussion continued about the tote process. Waste determinations are made by Knash; Benfield stated that his position is Experienced Operator. Meyer and Johns said Knash had over 30 years in the tote field and worked for the company for 20 years. Nash and his assistant "Jared" who is the Lead Man will do the rinsing of hazardous waste containing totes. It will take approximately a month to fill the collection tote of mixed material from hazardous and nonhazardous totes, according to Meyer.

Johns stated the facility can perform their own pH tests but will send out to a state approved lab for ignitability. Testing includes a full TCLP, ignitability, and pH. The facility will sample approximately every third collection tote for a waste determination and will do a pH test on every tote. The pH range is 4.5 to 11. TCLP results found cadmium and chromium in trace amounts. The samples are obtained by mixing material from many totes with a paddle and using a coliwasa to get the sample. Johns said the one collection tote t shipped was labeled as hazardous waste and shipped on a manifest in March 2017. This tote was sampled and had a full TCLP test on it. The sample failed for ignitability and was less than 140 degrees. The waste hauler also sampled and the result was less than 140 degrees. CLCM-Cornell Street never had a sample fail before.

The facility employs approximately eight people and the company has been at Cornell Street since 2004. Meyer stated this was when the idea of using totes was still in its infancy.

Johns explained that there are four waste streams:
1.A nonhazardous waste stream from the nonhazardous/hazardous tote.
2.A hazardous waste stream for the tote that failed ignitability. Now if something is "hot" it can be sent out as hazardous waste.
3.There is a profile for the prewash cleanout of the tank, which was sampled as nonhazardous. A company will come in and vacuum out the tanks and remove any water in the totes at the prewash stage.
4.Wash/rinse tank cleanout. This is a cleaner waste stream than the prewash and done by a different vendor. The wash/rinse tanks are brushed out. Both the prewash and the wash/rinse tanks change out are about every six months. The wash/rinse and prewash are separate waste streams because they may have different material in them.

Ellenbecker proceeded with the large quantity generator checklist (it was later determined that a treatment, storage, and disposal [TSD] facility inspection form was more applicable to CLCM than a LQG inspection form). One manifest and LDR was on-site and copies were made. The manifest for the collection tote showed the transporter and disposal facility as Badger Disposal with a date of 3/16/17. The manifest number was #003293960GBF and had waste codes of D001, F003, and F005 with 275 gallons disposed. Waste was described as waste flammable liquid (acetone, toluene). Johns stated that the 275 gallons was the size of the tote and the weight of the liquid was really 180 gallons. Meyer and Johns said most of the incoming totes previously contained product and usually no hazardous waste was stored in the totes.

The Milwaukee Fire Department makes regular inspections and the facility has had no major problems. Meyer stated that there is also specific RCRA training for Cornell Street. Johns explained that the specialized training at the location is because they recently became a small quantity generator and they had the hazardous waste tote. The training occurred before they sent the hazardous waste tote offsite. Waste minimization includes tote recycling and water is recycled in the prewash, wash and rinse tanks; only water from the pressure washer is wasted. There is no used oil generated onsite. Ellenbecker asked about used lamps. Meyer left to see where they would be located. After a few minutes, Meyer returned and said he asked other employees, there was no used lamps onsite. Ellenbecker gave Benfield a documentation request and Baerwald gave Johns the pictures to copy. Baerwald and Ellenbecker thanked Benfield, Meyer and Johns for their time and left the facility at approximately 2:25 p.m.

Safety Data Sheets were acquired to determine waste in the drums from the photos taken during the inspection.

Heavy Area:
Lauric Acid 95%: pH 10-12- not a hazardous waste based on pH
Hydrite Acetone: flashpoint <0F- hazardous waste

Specialist Reporting
Catherine Baerwald, Waste Management Specialist-Senior

Date of Report

March 23, 2017
Exhibit Reference

TREATMENT & STORAGE FACILITY INSPECTION

This Inspection Form, used for the inspection of facilities having a hazardous waste license to store and/or treat hazardous waste, evaluates facility compliance with Wisconsin's Hazardous Waste Management Rules (chapter NR 660 - 679, Wis. Admin. Code).

Section 1: Waste Received from Off-Site

A. Each manifest is signed and dated to certify receipt. Non-RCRA empties (i.e., totes holding hazardous waste) are routinely received at the facility without a uniform hazardous waste manifest. Since a manifest is not used NA was selected 1.A - 1.H	NA	664.0071(1)(a)
B. Significant manifest discrepancies are noted, if applicable.	NA	664.0071(1)(b)2
C. A copy of the signed manifest is provided to the transporter.	NA	664.0071(1)(b)3
D. A copy of the signed manifest is sent to the generator within 30 days.	NA	664.0071(1)(b)4
E. A copy of the signed manifest is sent to the Department within 45 days.	NA	664.0071(1)(b)4
F. A copy of the signed manifest is retained on-site for at least three years.	NA	664.0071(1)(b)5
G. If a significant manifest discrepancy is noted, the facility attempts to reconcile the discrepancy with the generator or transporter.	NA	664.0072(3)
H. If there is no resolution within 15 days of receiving the waste, the facility immediately submits a letter to the Department describing the situation and a copy of the manifest.	NA	664.0072(3)

Section 2: Rejected Shipments of Waste or Excess Residue in Containers

A. Facility has rejected shipments of hazardous waste or received containers with residues exceeding quantity limits for empty containers. If No, go to Section 3. Faclity also process non-RCRA empties totes.	Y	
B. Facility consulted with the generator before forwarding the waste to another facility. Non-RCRA empties are only returned to the generator either by a courier or generator comes to pick up totes.	NA	664.0072(4)(a)
C. Facility returns the rejected waste or residue to the generator when they can not forward the waste to an alternate facility. During the site inspection on March 15, 2017, it was learned that all non-RCRA empty totes containing hazardous waste are returned to the generator. These non-RCRA empty totes can only be returned to the generator when it is impossible to locate an alternative facility that can receive the hazardous waste.	X	664.0072(4)(a)
D. Facility sends the waste to an alternate facility or the generator within 60 days of rejection or identifying the excess container residue. The facility does not use a manifest so 'NA' was selected for 2.D to 2.K	NA	664.0072(4)(a)
E. Facility ensures the delivering transporter retains custody of the waste.	NA	664.0072(4)(b)
F. Facility provides secure, temporary custody of the waste before delivery to the first transporter.	NA	664.0072(4)(b)
G. Facility complies with the following if they use the original manifest to reject a full load to an alternate facility before the transporter leaves: **1. The facility forwards the rejected shipment to an alternate facility identified in Item 18b.** **2. The facility keeps one copy of the manifest for their records and gives the other copies to the transporter.**	NA	664.0072(5)(g)
H. Facility complies with the following if they use the original manifest to return a rejected shipment to the generator before the transporter leaves: **1. Complete items 18a and 18b, using the generator's information as the alternate facility.** **2. Retain one copy of the manifest and give the other copies to the transporter.**	NA	664.0072(6)(g)

TREATMENT & STORAGE FACILITY INSPECTION

This Inspection Form, used for the inspection of facilities having a hazardous waste license to store and/or treat hazardous waste, evaluates facility compliance with Wisconsin's Hazardous Waste Management Rules (chapter NR 660 - 679, Wis. Admin. Code).

Section 2: Rejected Shipments of Waste or Excess Residue in Containers

I. Facility complies with the following if they return a rejected waste to the transporter or generator after the manifest has been signed and dated: **1. Amend their copy of the manifest by indicating the rejected waste or residue in the discrepancy space of the manifest.** **2. Copy the manifest tracking number from Item 4 of the new manifest to the discrepancy space of the amended manifest.** **3. Re-sign and date the manifest to certify the amended information.** **4. Retain a copy of the amended manifest for at least 3 years from the date of the amendment.** **5. Send a copy of the amended manifest to the transporter, generator, and department within 30 days.**	NA	664.0072(7)
J. Facility complies with the following for other rejected waste or residues sent to an alternate facility: **1. Prepare a new manifest according to the appendix in 40 CFR part 262.** **2. Write the generator's EPA ID #, name and address on the manifest in Items 1 and 5.** **3. Write the alternate designated facility and EPA ID # in Item 8.** **4. Copy the manifest tracking number in Item 4 of the old manifest to the special handling block in Item 14 and indicate the shipment is a residue or rejected waste.** **5. Copy the manifest tracking number in Item 4 of the new manifest to the manifest reference number in Item 18a of the old manifest.** **6. Write the DOT description in Item 9, including container types, quantity and volume of waste.** **7. Sign the certification in Item 15 as the offerer of the shipment.**	NA	664.0072(5)
K. Facility complies with the following for other rejected waste or residues sent back to generator: **1. Prepare a new manifest according to the appendix in 40 CFR part 262.** **2. Write the facility's EPA ID# in Item 1 and the generator's name and address in Item 5 of the new manifest.** **3. Write the name and EPA ID# of the initial generator as the designated facility in Item 8.** **4. Copy the manifest tracking number in Item 4 of the old manifest to the special handling block in Item 14 of the new manifest and indicate the shipment as a residue or rejected waste.** **5. Copy the manifest tracking number in Item 4 of the new manifest to the manifest reference line in the discrepancy block of the old manifest in Item 18a.** **6. Write the DOT description in Item 9, including container types, quantity and volume of waste.** **7. Sign the certification in Item 15 as the offerer of the shipment.**	NA	664.0072(6)

Section 3: Waste Analysis Requirements

A. Before treatment or storage, the facility obtains a detailed chemical and physical analysis of all incoming wastes. During the site inspection on March 22, 2017, it was learned that MASD does not have a WAP.	X	664.0013(1)(a)
B. Waste samples are analyzed by laboratories certified or registered under NR 149. Provide lab names and certification numbers. Since the facaility does not have a WAP, 'NA" was slected for 3.B to 3.E.	NA	664.0013(1)(a)1
C. Waste analysis is repeated when EITHER of the following occurs: **1. The process generating the waste has changed.** **2. The shipment received does not match the waste designated on the manifest.**	NA	664.0013(1)(c)
D. Facility follows the stated procedures to inspect and, if necessary, analyze each incoming waste shipment to determine if the incoming waste matches the waste specified on the manifest.	NA	664.0013(3)
E. Facility follows their written waste analysis plan by performing ALL of the following: **1. Test the waste for the stated parameters.** **2. Use the stated test methods for each of the parameters.** **3. Use the desiginated sampling methods to obtain representative samples.** **4. Review or repeat the initial analysis according to stated frequencies.** **5. For off-site facilities, maintain waste analysis records supplied by generators.**	NA	664.0013(2)

Section 4: Waste Generated On-Site and Waste Shipments

A. A hazardous waste determination has been made on each solid waste generated. The site inspection on March 22, 2017, showed that MASD has not made a hazardous waste determinations or has made an in correct hazardous waste determinations for the following waste stream: When a customer's tote is found to contain material (i.e., waste) approximately 5 to 6 gallons of water is added to the tote. The addition of the water is used to dilute the waste so that it can be safety added to the facility's waste tote. This dilution also constitutes treatment if the customer's tote contains a hazardous waste and is not RCRA empty. The customers tote is then gravity drained into the facility's waste tote. When the waste is removed from the customer's tote, it is considered a new Point of Generation (POG), which requires a waste determination.	X	662.011

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Section 4: Waste Generated On-Site and Waste Shipments

B. Waste samples are analyzed by laboratories certified or registered under NR 149. Provide lab names and certification numbers.	NI	662.011(3)(a)
C. Waste determinations are made correctly, considering the listed waste definitions and the characteristics of the waste, in light of the materials or processes used. See 4.A	X	662.011(3)
D. Records of all waste determinations are kept on-site for at least 3 years from the date the waste was last sent to a storage, treatment or disposal facility. During the site inspection on March 22, 2017, MASD was unable to produce records showing how representative sampling was conducted on the hazardous material totes and the customer's totes.	X	662.040(3)
E. A manifest is initiated with all off-site shipments of hazardous waste. Only one manifest shipment (3//11/17) in facility history.	C	662.020(1)
F. The manifest is used according to the instructions in the appendix to 40 CFR part 262.	C	662.020(1)
G. The facility designated on the manifest is permitted or licensed to accept the waste.	C	662.020(2)
H. For out-of-state shipments, a copy of the manifest is sent to the department within 30 days of receiving the signed copy from the designated facility.	NA	662.023(3)
I. Manifest continuation form, EPA form 8700-22A, is prepared according to the instructions in the appendix of 40 CFR part 262.	NA	662.020(1)
J. Copy of the manifest signed by the facility is retained until the signed copy from the designated facility is received.	C	662.040(1)
K. Copy of each manifest is kept for at least three years from the date of shipment.	C	662.040(1)
L. Transporter or TSD is contacted if the signed manifest is not received in 35 days.	NI	662.042(1)
M. Exception report is submitted to the Department if signed manifest is not received within 45 days.	NI	662.042(2)
N. Hazardous waste is packaged according to applicable DOT requirements before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.030
O. Hazardous waste is labeled according to applicable DOT requirements before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.031
P. Hazardous waste is marked according to applicable DOT requirements before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.032(1)
Q. Containers of 119 gallons and less are marked with the "Hazardous Waste-Federal law prohibit improper disposal" label before transport. If no pretransportation activities are taking place during the inspection answer as 'NA'	NA	662.032(2)
R. Placards are offered to the initial transporter.	NA	662.033

Section 5: Land Disposal Restrictions

A. Facility has determined if each waste is prohibited from land disposal by lab analysis or generator knowledge.	NI	668.07(1)

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Section 5: Land Disposal Restrictions

B. Facility complies with the prohibition against dilution of wastes. The site inspection on March 22, 2017, showed that a D001 restricted hazardous waste was treated by dilution using water. MASD explained that one of the hazardous material totes was recently sent off-site as a D001 hazardous waste. The hazardous wastes in this tote consisted of mixed wastes from numerous non-RCRA empty totes that have been diluted with water. The correct treatment standard for a D001 that is in the high TOC ignitable characteristic liquids subcategory is by organic recovery, combustion, or polymerization. It is likely that when a D001 hazardous waste is removed from a customer's totes and placed into the facility's waste tote is becomes so diluted that ignitability characteristic is removed, which would constitutes impermissible dilution of a hazardous waste.	X	668.03
C. A one-time written notice is sent to each treatment, storage or disposal facility with the initial waste shipment.	C	668.07(1)
D. A new notification is sent to the TSD and maintained in the generator file when the waste or receiving facility changes.	C	668.07(1)
E. If the waste MEETS treatment standards, the LDR notice certifies the waste may be land disposed without further treatment.	NA	668.07(1)
F. If the waste EXCEEDS treatment standards, the LDR notice gives notification of appropriate treatment and application prohibitions.	C	668.07(1)
G. Underlying hazardous constituents have been identified for characteristic wastes.	C	668.09(1)
H. Generator has identified the treatment standards for the listed waste code, in lieu of the treatment standard for the characteristic waste code, when waste is both a listed and characteristic waste OR has identified the treatment standards for all applicable listed and characteristic waste codes.	C	668.09(2)
I. Each container is clearly marked to identify its contents.	C	668.50(1)(b)
J. Each container is marked with the date on which each period of accumulation began. The site inspection on March 22, 2017, of the 'heavies' storage showed that the tote containing hazardous waste was not dated with the date the tote arrived at the facility.	X	668.50(1)(b)
K. The facility may store the wastes for up to one year unless the department can demonstrate that the storage was not solely for the purpose of accumulation of quantities of hazardous waste as are necessary to facilitate proper recovery, treatment or disposal.	NA	668.50(2)
L. If waste is stored for more than 1 year, the facility can prove that storage is necessary to facilitate proper recovery, treatment or disposal.	NA	668.50(3)

Section 6: Recordkeeping and Reporting

A. An operating record is maintained at the facility.	C	664.0073(1)
B. The operating record contains ALL of the following information, as applicable: **1. Description and quantity of each waste received.** **2. Method and date of each wastes treatment, storage or disposal.** **3. Location and quantity of each hazardous waste within the facility.** **4. Records and results of the waste analysis performed.** **5. Summary reports and details of all incidents that required implementation of the contingency plan.** **6. Closure cost estimates and any changes that are made in these estimates.** **7. Other monitoring, analytical data and testing, as required.** **8. For off-site storage and treatment facilities, a copy of the LDR notice required by the generator or the owner/operator.** **9. For on-site storage and treatment facilities, the information contained in the LDR notice, except the manifest number, required by the generator or owner/operator.** The site inspection on March 22, 2017, showed that the facility operating record lacked the information above:	X	664.0073(2)
C. Documents in the operating record are maintained until closure of the facility.	C	664.0073(2)

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Section 6: Recordkeeping and Reporting

D. Annual reports covering facility activities during the previous calendar year are submitted to the Department by March 1 of the following year. A review of department records on March 28, 2017, showed that MASD's annual reports do not include hazardous waste that was received from off-site or hazardous waste treated on-site.	X	664.0075
E. Facility submitted an unmanifested waste report within 15 days if the facility received a waste from an off-site source without an accompanying manifest or shipping paper AND the waste is not excluded from manifest requirements due to VSQG status. The site inspection on March 22, 2017, showed that MASD receives from off-site non-RCRA empty totes containing hazardous waste without an accompanying uniform hazardous waste manifest.	X	664.0076
F. Annual reports and unmanifested waste reports are available for inspection. NA was selected because there are no annual reports.	NA	664.0074(1)

Section 7: Preparedness and Prevention

A. Facility is equipped with ALL of the following, unless the equipment is not necessary for the types of wastes handled: **1. Device to summon emergency assistance (e.g., telephone, 2 way radio).** **2. Internal communications and alarm systems.** **3. Portable fire extinguishers.** **4. Fire control equipment, including special extinguishing equipment.** **5. Spill control equipment.** **6. Decontamination equipment (e.g., eyewash, shower).** **7. Water at adequate volume and pressure to supply water spray systems.**	C	664.0032
B. Emergency equipment listed in Question 7.A is tested and maintained to assure its proper operation in an emergency.	C	664.0033
C. There is immediate access to internal or external alarms or an emergency communication device in hazardous waste handling areas.	C	664.0034
D. Facility has made ALL of the following arrangements with emergency organizations: **1. Primary and support roles have been defined if multiple police and fire departments could respond to an emergency.** **2. Police, fire and emergency response teams are familiar with the facility layout, hazards of the waste handled, places where personnel work, entrances and roads in the facility and possible evacuation routes.** **3. Agreements are made with emergency response contractors and equipment suppliers.** **4. Local hospitals are familiar with the properties of wastes handled and the types of injuries or illnesses that could result from an emergency.**	C	664.0037
E. Aisle space is provided throughout the facility to allow for the unobstructed movement of personnel and all emergency equipment.	C	664.0035

Section 8: Contingency Plan

A. Facility has a written contingency plan that will be implemented immediately in the event of a fire, explosion or hazardous waste discharge. The site inspection on March 15, 2017, showed that the facility did not have a written contingency plan that meets the requirements of subchapter D of chapter NR 664 WAC	X	664.0051
B. Facility amended a SPCC plan or other emergency plan so it sufficiently incorporates hazardous waste management provisions.	NA	664.0052(2)
C. Copies of the contingency plan and all revisions have been made available to police, fire, hospital and emergency response teams.	NA	664.0053(2)
D. Contingency plan was amended due to ANY of the following: **1. Facility license was revised.** **2. Contingency plan failed in an emergency.** **3. Changes in site design, construction, O&M, or other circumstances affect emergency response.** **4. Emergency coordinators changed.** **5. Emergency equipment changed.**	NA	664.0054

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Section 8: Contingency Plan

E. Contingency plan identifies an emergency coordinator who meets ALL of the following: **1. Available or on call to coordinate emergency response measures.** **2. Familiar with all aspects of site activities and the contingency plan.** **3. Has authority to commit the resources needed to carry out the contingency plan.**	**NA**	664.0055
F. Contingency plan includes ALL of the following: **1. Designation of the primary emergency coordinator, with alternates listed in the order of assuming responsibility.** **2. Name, address and phone number, office and home, for each emergency coordinator.** **3. Description of the arrangements agreed to by the police, fire, hospitals and emergency response teams to coordinate emergency services.** **4. Evacuation plan for personnel including signal(s) to be used in the event of evacuation and alternate routes.** **5. Actions facility personnel will take in response to a fire, explosion or hazardous waste discharge.** **6. List of emergency equipment at the facility including location, description, and capabilities of each item.**	**NA**	664.0052
G. Contingency plan requires the emergency coordinator to do ALL of the following in the event of a fire, explosion, or discharge of hazardous waste: **1. Activate internal alarms or communication systems.** **2. Notify appropriate authorities, if their help is needed.** **3. Identify the character, source, amount, and extent of discharged hazardous materials.** **4. Assess hazards to human health and the environment.** **5. If the incident threatens human health or the environment outside the facility, notify local authorities that evacuation may be necessary and notify the national response center (800-424-8802) and the division of emergency government (800-943-0003).** **6. Take all reasonable measures necessary to ensure fires, explosions and discharges do not occur, reoccur, or spread.** **7. Monitor for leaks, pressure buildup, gas generation or ruptures in valves, pipes, or other equipment if the facility stops operation.** **8. Provide for treating, storing, or disposing of recovered waste, contaminated soil, surface water, or other material.** **9. Ensure wastes that are incompatible with the released material are not treated, stored or disposed until cleanup is completed.** **10. Ensure that emergency equipment is clean and fit for use prior to resuming operations.** **11. Notify the department and appropriate state and local authorities before resuming operations.** **12. Submit an incident report to the department within 15 days.**	**NA**	664.0056

Section 9: Security and General Inspection Requirements

A. Facility has EITHER of the following to prevent the unknowing entry and minimize the unauthorized entry of persons or livestock onto active portions of the site: **1. 24-hour surveillance system (guards, facility personnel, or television).** **2. Artificial or natural barriers to control entry (fence around active portions of facility) AND a means to control entry (attendants, locked entrances or controlled roadway access).**	**C**	664.0014(2)
B. "Danger - Unauthorized Personnel Keep Out" signs are posted at entrances and other locations. The site inspection on March 22, 2017, showed the facility lacked signs with the legend, "Danger - Unauthorized Personnel Keep Out", posted at each entrance to the active portion of a facility, and at other locations, in sufficient numbers to be seen from any approach to this active portion.	**X**	664.0014(3)
C. Facility conducts inspections to determine if problems exist which could cause an environmental or human health hazard. The site inspection on March 22, 2017, showed that the facility does not have an inspection program for malfunctions and deterioration, operator errors and discharges, which may be causing, or may lead to, release of hazardous waste constituents to the environment or a threat to human health.	**X**	664.0015(1)
D. Inspections are conducted frequently enough to identify and correct problems before they harm human health or the environment. Since the facility is not in compliance with 9.C. 'NA' was selected for 9.D to 9.I.	**NA**	664.0015(1)
E. Facility is following a written inspection schedule for the following equipment: **1. Monitoring equipment.** **2. Safety and emergency equipment.** **3. Security devices.** **4. Operating and structural equipment.**	**NA**	664.0015(2)(a)
F. Facility looks for problems identified in the inspection schedule during their inspections.	**NA**	664.0015(2)(c)

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Section 9: Security and General Inspection Requirements

G. Problems are remedied on a schedule that ensures they do not lead to environmental or human health hazards.	**NA**	664.0015(3)
H. Written inspection log is maintained at the facility for at least 3 years.	**NA**	664.0015(4)
I. Inspection logs include ALL of the following: **1. Date and time of inspection.** **2. Name of inspector.** **3. Notation of the observations made.** **4. Date and nature of repairs or remedial actions.**	**NA**	664.0015(4)

Section 10: Personnel Training Requirements

A. Facility has a program of classroom instruction or on-the-job training for personnel in hazardous waste management.	**C**	664.0016(1)(a)
B. Program is directed by a person trained in hazardous waste management procedures.	**C**	664.0016(1)(b)
C. Program teaches facility personnel hazardous waste management procedures relevant to the positions in which they are employed.	**NI**	664.0016(1)(b)
D. Training program ensures personnel are able to respond effectively to emergencies by familiarizing them with the following applicable items: **1. Contingency plan implementation.** **2. Procedures for using, inspecting, repairing, and replacing emergency and monitoring equipment.** **3. Key parameters for automatic waste feed cut-off systems.** **4. Communications and alarm systems.** **5. Response to fires or explosions.** **6. Response to groundwater contamination incidents.** **7. Shutdown of operations.**	**NI**	664.0016(1)(c)
E. New employees are trained within 6 months of their assignment.	**C**	664.0016(2)
F. Employees work in supervised positions until they complete the training.	**C**	664.0016(2)
G. Personnel take part in an annual review of the training.	**C**	664.0016(3)
H. Facility keeps ALL of the following training documents: **1. Job title and the employee name for each position related to hazardous waste management.** **2. Job description of each of the above job titles.** **3. Description of the amount and type of introductory and continuing training that will be given to each employee.** **4. Records that required training has been given to each employee.** The site inspection on March 22, 2017, showed that the facility's training records do not include the informationlocated above.	**X**	664.0016(4)
I. Training records are maintained until closure for current personnel and at least 3 years from the date the employee last worked at the facility.	**NI**	664.0016(5)

Section 11: Ignitable, Reactive or Incompatable Waste

A. Facility treats or stores ignitable, reactive or incompatible waste. If NO, go to Section 12.	**Y**	
B. Facility takes precautions to prevent accidental ignition or reaction in the following ways: **1. Separate and protect waste from sources of ignition or reaction.** **2. Confine smoking and open flame to specially designated locations.** **3. Conspicuously place "No Smoking" signs where there is a hazard from ignitable or reactive wastes.**	**C**	664.0017(1)

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Section 11: Ignitable, Reactive or Incompatable Waste

C. Facility treats, stores, or mixes ignitable, reactive, or incompatible wastes so that the waste does not result in any of the following: **1. Generate extreme heat or pressure, fire, or explosion, or violent reaction.** **2. Produce uncontrolled toxic mists, fumes, dust or gases in sufficient quantities to threaten human health.** **3. Produce uncontrolled flammable fumes or gases in sufficient quantities to pose a fire or explosion risk.** **4. Damage the structural integrity of the device or facility containing the waste.** **5. Otherwise threaten human health or the environment.**	C	664.0017(2)
D. Containers of ignitable or reactive waste are located at least 50 feet from the property line.	C	664.0176
E. Incompatible wastes are stored in separate containers unless the mixing will not generate extreme heat, fire, explosion, toxic gases or other dangers	C	664.0177(1)
F. Containers that previously held waste are washed before adding incompatible waste.	C	664.0177(2)
G. Containers of incompatible wastes are separated or protected from each other by a physical barrier (dike, berm, wall or other device).	C	664.0177(3)

Section 12: Container Standards

A. Facility stores or treats hazardous waste in containers. If NO, go to Section 13.	Y	
B. If a container is leaking or in poor condition, the contents are transferred to another container in good condition.	C	664.0171
C. Containers are made or lined with materials that are compatible with the waste.	C	664.0172
D. Containers are kept closed, except when it is necessary to add or remove waste.	C	664.0173(1)
E. Containers are opened, handled or stored to prevent ruptures or leaks.	C	664.0173(2)
F. Container storage areas are inspected weekly for leaks and deterioration. The site inspection on March 22, 2017, showed that the 'heavies' area and other areas where hazardous wastes are stored, are not inspected on a weekly basis.	X	664.0174
G. Inspections of the container storage areas are documented in an inspection log. NA was seleteced since there are no inspections are conducted.	NA	664.0015(4)
H. Base of the containment system is free of cracks and sufficiently impervious to contain leaks. The site inspection on March 22, 2017, showed that the area used to store the hazardous waste heavies consist of an unsealed and non-bermed concrete pad (i.e., no containment). An unsealed concrete pad is not imperious and therefor does not qualify as a containment system.	X	664.0175(2)(a)
I. Waste and accumulated precipitation are removed from the sump or collection area in a timely manner to prevent overflow of the collection system. NA was seleteced since there is no containment.	NA	664.0175(2)(e)

Section 13: Subchapter AA Standards for Process Vents

A. The facility conducts distillation, fractionation, thin-film evaporation, solvent extraction, air stripping operations or steam stripping operations in units managing hazardous waste. If NO, go to Section 14.	N	
B. The facility has determined that the process vents are not subject to subch. AA by making an initial determination that the time-weighted, annual average total organic concentration of the waste managed in the above units is <10 ppmw by direct measurement of the organic concentration of the waste calculated as an arithmetic mean from 4 grab samples OR by knowledge of the waste.	NA	664.1034(4)

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Section 13: Subchapter AA Standards for Process Vents

C. If knowledge of the waste was used, the facility maintains ANY of the following: **1. Documentation showing no organic compounds are used in the process.** **2. Documentation showing that another identical process generates waste with < 10 ppmw total organic content.** **3. If based on prior analysis, documentation showing there has been no change to the process that would affect total organic concentration.** **4. Other similar documentation.**	NA	664.1034(4)
D. If the facility determined that the average total organic concentration is <10 ppmw, the determination has been made according to ALL of the following: **1. When the waste was first managed in the waste management unit or when the facility became subject to subch. AA.** **2. Annually thereafter for continuously generated waste.** **3. When there was a change in the waste managed or a change in the process generating or treating the waste.**	NA	664.1034(5)
E. The operating record includes the information used to determine that the time weighted, annual average total organic concentration managed in the waste management unit is <10 ppmw.	NA	664.1035(6)
F. The facility has determined they are not subject to subch. AA because they have certified that all process vents are equipped with air emission controls operating according to the process vent requirements in the Clean Air Act.	NA	664.1030(5)
G. All process vents are excluded from subch. AA requirements because the average total organic concentration is <10 ppmw or because the vents are equipped with air emission controls. If YES, go to Section 14.	N	
H. The total organic emissions from all process vents subject to subch. AA have been reduced to EITHER of the following: **1. Below 3 lb/hr and 3.1 tons/yr.** **2. By 95 weight percent using a control device.**	NA	664.1032(1)
I. Vent emissions and emission reductions or total organic compound concentrations are achieved by add-on control devices that are based on engineering calculations or performance tests.	NA	664.1032(3)
J. When knowledge of the waste or process is used to determine if the process vent is subject to subch. AA standards, the operating log includes ALL of the following information which is based on engineering calculations or performance tests: **1. Vent emissions.** **2. Emission reduction rates.** **3. Total organic compound concentrations achieved by add-on control devices.**	NA	664.1035(6)
K. The facility uses a closed-vent system and control device to reduce total organic emissions. If YES, complete the inspection form, "TSD Subch. AA & BB Standards for Closed Vent Systems and Control Devices".	N	

Section 14: Subchapter BB Standards for Equipment Leaks

A. The facility operates any of the following equipment that contains or contacts hazardous wastes with organic concentrations >=10% by weight. If NO, go to Section 15. **1. Pumps in light liquid service.** **2. Compressors.** **3. Pressure relief devices in gas or vapor service.** **4. Sampling connection systems.** **5. Open-ended valves or lines.** **6. Valves in gas or vapor service or in light liquid service.** **7. Pumps or valves in heavy liquid service** **8. Pressure relief devices in light liquid or heavy liquid service.** **9. Flanges or other connectors.**	N	
B. The equipment listed in Question 14.A is excluded from subch. BB requirements because it is in vacuum service and individually listed in the facility operating record by an identification number (NR 664.1064(7)(e)).	NA	664.1050(5)
C. The equipment listed in Question 14.A is excluded from subch. BB requirements because it operates < 300 hours per calendar year AND is identified, either by list or location (area or group), in the facility operating record.	NA	664.1050(6)

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Section 14: Subchapter BB Standards for Equipment Leaks

D. If the facility determines compliance with subch. BB by documenting compliance with the Clean Air Act requirements, the documentation is readily available as part of the operating record.	**NA**	664.1064(13)
E. The following information used to determine the applicability of the exclusions in Questions 14.A - 14.D is recorded in the operating log: **1. Analysis determining the design capacity of the hazardous waste management unit.** **2. Statement listing the hazardous waste influent to and effluent from each hazardous waste management unit subject to subch. BB and an analysis determining whether these hazardous wastes are heavy liquids.** **3. Up-to-date analysis and the supporting information used to determine whether or not equipment is subject to subch. BB.**	**NA**	664.1064(11)
F. When knowledge of the nature of the hazardous waste stream or the process by which it was produced is used to determine the applicability of the exclusions, supporting documentation such as the following is recorded in the operating log: **1. Information that the production process does not use organic compounds.** **2. The process is identical to a process at another facility where the total organic content was measured at <10%** **3. The process has not changed to affect the total organic concentration of the waste.**	**NA**	664.1064(11)
G. The operating log includes new determinations which are performed when changes could result in an increase in the total organic content of the waste in contact with equipment determined not to be subject to subch. BB requirements.	**NA**	664.1064(11)
H. All of the equipment listed in Question 14.A is excluded from additional subch. BB requirements. If NO, complete the TSD subch. BB inspection form.	**N**	

Section 15: Subchapter CC Level 1 Standards for Containers

A. The facility manages hazardous waste in containers with EITHER of the following design capacities. If NO, go to Question 15.V (NR 664.1086(2)(a)). **1. Between 26 and 119 gallons.** **2. Greater than 119 gallons that are not in light material service.**	**N**	
B. Containers are exempt from subch. CC because of ALL of the following (NR 664.1083(1), NR 664.1082(3)(a)): **1. The average VO concentration at the point of origination is <500 ppmw for all hazardous waste entering the container.** **2. The initial determination of the average VO concentration for the waste stream was made before the material was placed in the container.** **3. The initial determination is reviewed and updated at least once every 12 months.** **4. A new waste determination is performed whenever changes to the source generating the waste stream likely causes the average VO concentration to increase to 500 ppmw.** **5. The average VO concentration is determined by direct measurement or by knowledge. Note: See NR 665.1084(1)(c) for direct measurement procedures and NR 665.1084(1)(d) for using knowledge.**	**NA**	
C. For each waste determination, the date, time, and location of each waste sample collected are maintained in the facility records.	**NA**	664.1089(6)(a)
D. Containers are exempt from subch. CC because of EITHER of the following (NR 664.1082(3)): **1. The organic content of all waste entering the container has been reduced by an organic destruction or removal process described in NR 664.1082(3).** **2. The hazardous organic constituents of the waste placed in the container have been treated to meet LDR standards.**	**NA**	
E. Containers are excluded from subch. CC because they are used to store or treat hazardous waste from organic peroxide manufacturing processes (NR 664.1080(4)). **Note: Certain records must be maintained. Refer to NR 664.1089(9) for more information.**	**NA**	
F. Containers are excluded from subch. CC because they are used solely to store or treat EITHER of the following (NR 664.1080(2)): **1. On-site remediation wastes generated through NR 700 or RCRA corrective action activities.** **2. Radioactive mixed wastes in accordance with NRC requirements.**	**NA**	

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Section 15: Subchapter CC Level 1 Standards for Containers

G. Containers are excluded from subchapter CC because of BOTH of the following (NR 664.1080(2), NR 664.1089(10)): **1. They are equipped with air emission controls operated in accordance with the Clean Air Act requirements.** **2. Facility records include a certification of such by the owner or operator and the specific air program compliance requirements for the containers .**	**NA**	
H. All containers managed at the facility are excluded from subch. CC level 1 requirements. If YES, go to Question 15.V.	**NA**	
I. Any of the following controls are used on all Level 1 containers subject to subch. CC: **1. Container meets applicable US DOT packaging requirements.** **2. A cover and closure devices form a continuous barrier over the container openings such that when they are secured, there are no visible holes, gaps or other open spaces into the container.** **3. An organic-vapor suppressing barrier is placed on or over the hazardous waste in an open-top container so that the hazardous waste is not exposed to the atmosphere.** **Note: Level 1 standards do not apply to satellite accumulation or RCRA empty containers.**	**NA**	664.1086(3)(a)
J. Level 1 containers that do not meet applicable US DOT packaging requirements are equipped with covers and closure devices composed of suitable materials that result in BOTH of the following: **1. Minimize exposure of hazardous waste to the atmosphere.** **2. Maintain integrity of the covers and closure devices.**	**NA**	664.1086(3)(b)
K. If a Level 1 container is filled to the final level in one continuous operation, the closure device is promptly secured in the closed position when the filling operation is concluded.	**NA**	664.1086(3)(c)
L. If a Level 1 container is batch filled, the closure device is promptly secured in a closed position when the container is filled to the intended final level OR the batch loading is completed and any of the following first occurs: **1. No additional material will be added within 15 minutes.** **2. The person performing the loading operation leaves the immediate vicinity of the container.** **3. The process generating the waste shuts down.**	**NA**	664.1086(3)(c)
M. If Level 1 containers are opened to remove hazardous waste, the closure device is secured in the closed position upon completion of a batch removal AND when either of the following first occurs: **1. No additional materials will be removed within 15 minutes.** **2. The person removing the waste leaves the immediate vicinity of the container.**	**NA**	664.1086(3)(c)
N. If access to the inside of a Level 1 container is needed to perform routine activities other than the transfer of hazardous waste (e.g., sampling), the closure device is secured in the closed position promptly after completing the activity.	**NA**	664.1086(3)(c)
O. If a Level 1 container is equipped with a pressure relief device that vents to the atmosphere, ALL of the following conditions are met: **1. The device is designed to operate with no detectable organic emissions (< 500 ppmv) when in the closed position.** **2. The device is closed when the internal pressure is within the specified operating range.** **____ The device opens and vents to the atmosphere only for the purpose of maintaining internal pressure according to the design specifications.**	**NA**	664.1086(3)(c)
P. Safety valves are only opened to avoid an unsafe condition.	**NA**	664.1086(3)(c)
Q. When first taking possession of a Level 1 container that will not be emptied within 24 hours, the facility visually inspects the container, cover and closure device for visible cracks, holes, gaps or other open spaces on or before the date the facility accepts the container (e.g., signs the manifest).	**NA**	664.1086(3)(d)
R. If a Level 1 container remains at the facility for one year or more, the container, its cover and closure devices are visually inspected initially and at least once every 12 months for cracks, gaps or other open spaces.	**NA**	664.1086(3)(d)
S. When a defect is detected, initial repair efforts are made within 24 hours of detection and completed within 5 calendar days.	**NA**	664.1086(3)(d)
T. If repairs cannot be completed in 5 days, the waste is removed from the container which is not used until it is repaired.	**NA**	664.1086(3)(d)

TREATMENT & STORAGE FACILITY INSPECTION

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Section 15: Subchapter CC Level 1 Standards for Containers

U. Inspections records for subchapter CC containers are maintained in the operating log for at least 3 years.	**NA**	664.0015(2)(d)
V. If a facility managed hazardous waste with an average VO concentration >500 ppmw or without adequate reduction of the organic content by an organic destruction or removal process in a container exempt from subch. CC level 1, 2 or 3 standards, the facility submitted a written report to the department which includes all of the following information: **1. Name of the facility, EPA ID#, and address.** **2. A description of the noncompliance event and the cause.** **3. The dates of noncompliance.** **4. The actions taken to correct the noncompliance and prevent reoccurrence.**	**NA**	664.1090(1)
W. The report in Question 15.W is submitted within 15 calendar days of the time the owner or operator becomes aware of the occurrence.	**NA**	664.1090(1)

Section 16: Subchapter CC Level 2 Standards for Containers

A. The facility manages hazardous waste containers with a design capacity >119 gallons that are in light material service. If NO, go to Section 17.	**Y**	
B. Any of the following controls are used on Level 2 containers: **1. Container meets applicable US DOT packaging requirements.** **2. Each potential leak interface where organic vapor leakage could occur on the container, cover and closure device has been checked to determine that no detectable organic emissions (< 500 ppmv) are occurring.** **3. The facility has demonstrated within the last 12 months that the containers are vapor-tight using Method 27 in appendix A of 40 CFR part 60.**	**NI**	665.1087(4)(a)
C. If the container is vented inside an enclosure, the enclosure is operated according to the criteria for permanent total enclosures found in Method 204 in appendix M of 40 CFR part 51.	**NA**	665.1087(5)(b)1
D. If the potential leak interface on the containers were checked, BOTH of the following were met: **1. Checks were made on the interface of the cover rim and the container wall; the periphery of any opening on the container or container cover and its associated closure device; and, the sealing seat interface on a spring-loaded, pressure-relief valve.** **2. The test was performed when the container was filled with a material having a VO concentration representative of the hazardous waste expected to be stored in the container.**	**NI**	665.1087(4)(a)
E. The facility maintains a copy of the procedure used to determine that containers >119 gallons in size that do not meet DOT requirements are not managing hazardous waste in light material service.	**NI**	665.1087(3)(e)
F. Level 2 controls are used when transferring waste in or out of the container that minimize exposure to the atmosphere (submerged-fill pipe, vapor-recovery system, etc.) to the extent practical, considering the physical properties of the hazardous waste and good engineering and safety practices. The site inspection on March 22, 2017, showed that submerge fill (or another method that minimizes exposure of hazardous waste to the atmosphere) is not used when hazardous waste subject that is subject to CC is added to the hazardous material tote.	**X**	665.1087(4)(b)
G. If the container is filled to the final level in one continuous operation, the closure devices are promptly secured in the closed position when the filling operation is concluded.	**NA**	665.1087(4)(c)1.a
H. If the container is batch filled, the closure devices are promptly secured in a closed position upon filling the container to the intended final level, or when the batch loading is completed and ANY of the following first occurs: **1. No additional material will be added within 15 minutes.** **2. The person performing the loading operation leaves the immediate vicinity of the container.** **3. The process generating the waste shuts down.**	**NI**	665.1087(4)(c)1.b
I. If containers are opened to remove hazardous waste, closure devices are secured in the closed position upon completion of a batch removal and either of the following first occurs: **1. No additional materials will be removed within 15 minutes.** **2. The person removing the waste leaves the immediate vicinity of the container.**	**NI**	665.1087(4)(c)2.b
J. If access to the inside of the container is needed to perform routine activities other than the transfer of hazardous waste (e.g., sampling), the closure device is secured in the closed position promptly after completing the activity.	**NI**	665.1087(4)(c)3

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Section 16: Subchapter CC Level 2 Standards for Containers

K. If the container is equipped with a pressure relief device that vents to the atmosphere, the device meets ALL of the following conditions: **1. Designed to operate with no detectable organic emissions when in the closed position.** **2. Closed when the internal pressure is within the specified operating range.** **3. Opens and vents to the atmosphere only for the purpose of maintaining internal pressure according to the design specifications.**	**NI**	665.1087(4)(c)4
L. Safety valves are only opened to avoid an unsafe condition.	**NI**	665.1087(4)(c)5
M. When a defect is detected, initial repair efforts are made within 24 hours of detection.	**NI**	665.1087(4)(d)3
N. Repairs are completed within 5 days, or the waste is removed from the container which is not used until the defect is repaired.	**NI**	665.1087(4)(d)3

Section 17: Subchapter CC Level 3 Standards for Containers

A. The facility manages hazardous waste in containers having a design capacity >26 gallons during a waste stabilization process when hazardous waste is exposed to the atmosphere. If NO, go to Section 18.	**N**	
B. The container is vented directly through a closed-vent system to a control device, or the container is vented inside an enclosure which is exhausted through a closed-vent system to a control device.	**NA**	665.1087(5)(a)
C. If the container is vented inside an enclosure, the enclosure is operated according to the criteria for permanent total enclosures found in Method 204 in appendix M of 40 CFR part 51.	**NA**	665.1087(5)(b)1
D. Records for the most recent set of calculations and measurements verifying the enclosure meets the criteria for a permanent total enclosure in Method 204 in appendix M of 40 CFR part 51 are maintained at the facility.	**NA**	665.1090(4)(a)
E. Level 3 controls are used when wastes are transferred in or out of the container that minimize exposure to the atmosphere (e.g., submerged-fill pipe, vapor-recovery system, etc.) to the extent practical, considering the physical properties of the hazardous waste and good engineering and safety practices.	**NA**	665.1087(5)(f)

Section 18: Financial Responsibility

A. The facility maintains the following proof mechanism for closure: **1. Closure trust fund** **5. Net worth test** **2. Surety bond** **6. Deposit with the department** **3. Letter of credit** **7. Escrow account** **4. Insurance** **8. Multiple financial mechanisms** A record review on March 28, 2017, showed that MASD does not have financial responsibility for closure of the facility using a financial assurance mechanism that is acceptable to the department.	**X**	664.0143
B. The facility complies with EITHER of the following: **1. The amount of the proof mechanism being maintained is adequate to cover the most recent closure cost estimate.** **2. The facility is taking steps to increase the financial assurance to cover the closure costs within 60 days of a cost increase.** NA was selected since the faclity does not have financial responsibility for closure.	**NA**	664.0143
C. The facility has the following type of liability coverage for sudden accidental occurrences: **1. Insurance** **5. Surety bond** **2. Financial test** **6. Trust fund** **3. Guarantee** **7. Multiple financial mechanisms** **4. Letter of credit**	**NI**	664.0147(1)
D. Indicate the date of the most recent financial review done by the Department. No review has been done		
E. The Department found that the financial responsibility for closure and liability coverage was adequate during the most recent financial review.	**NA**	

TREATMENT & STORAGE FACILITY INSPECTION

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Section 19: License Requirements

A. Facility is in compliance with the conditions of their license. Facility has no license, so NA was selected for 19.A to 19.C	NA	670.032
B. Facility has not exceeded capacity limits for storage or treatment units.	NA	670.032
C. Facility notified the Department or requested a modification to their license, as required, for any changes at the facility.	NA	670.042

Section 20: Waste Minimization

A. Facility has a program to reduce the volume and toxicity of hazardous waste generated to the greatest economical degree possible. The site inspection on March 22, 2017, showed that there is no written waste minimization program and a record review on March 28, 2017, showed that the department has not received from MASD the annual certification for waste minimization.	X	664.0073(2)(i)
B. A waste minimization certification is signed at least annually and is maintained in the facility's operating record.	X	664.0073(2)(i)
C. Facility includes waste minimization information in its annual report. NA was selected since the facility does not have a waste minimization plan nor does the facility file an annual report.	NA	664.0075

Section 21: Used Oil

A. Used oil is managed on-site. If NO, go to Section 22	N	
B. Used oil containing >= 1,000 ppm halogens is managed as listed hazardous waste or the rebuttable presumption requirements have been met.	NA	679.10(2)(a)2
C. Used oil containers and tanks are in good condition and not leaking.	NA	679.22(2)
D. Used oil containers and tanks are marked "used oil".	NA	679.22(3)(a)
E. Transporter has an EPA ID number, except when generator self-transports or has a tolling arrangement.	NA	679.24
F. If oil containing materials are disposed of as a solid waste, the used oil has been properly drained so there is no visible sign of free-flowing oil and a waste determination has been properly made.	NA	679.10(3)(a)
G. If used oil is burned in an on-site used oil-fired space heater, all of the following are met: **1. Only used oil from the generator or household do-it-yourselfers is burned.** **2. The heater is designed with a maximum capacity of 0.5 million BTU per hour or less.** **3. The combustion gases are vented to the ambient air.**	NA	679.23
H. If used oil is accepted from others or sent off-site to be burned in a space heater, the used oil meets fuel specifications and the marketer requirements in NR 679 subch. H are met.	NA	679.11

Section 22: Universal Waste

A. The facility is a small quantity handler of universal waste (never accumulates more than 11,025 lbs). If NO, state in the comments section if the facility is a universal waste nonhandler, large handler or destination facility, and go to Section 23. **Note: If the facility is a large handler, complete the large quantity handler of universal waste inspection form.**	Y	

TREATMENT & STORAGE FACILITY INSPECTION

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Section 22: Universal Waste

B. Universal waste has not been disposed, treated or diluted. **Note: Dilution or treatment does not include: sorting, mixing, discharging, regenerating, or disassembling batteries; removing batteries from consumer products or removing electrolytes; removing thermostat ampules; or, responding to a release of universal waste.**	**NI**	673.11
C. Universal waste batteries and thermostats that are broken or show evidence of leakage or spillage are placed in closed, structurally sound containers that are compatible with the waste and not leaking.	**NI**	673.13
D. Universal waste lamps and pesticides are placed in closed, structurally sound containers that are compatible with the waste and are not leaking.	**NI**	673.13
E. All universal wastes are labeled or marked "Waste" or "Used" followed by the specific type of universal waste handled or "Universal Waste".	**NI**	673.14
F. Universal waste is accumulated for less than one year from the date generated or received from another handler.	**NI**	673.15(1)
G. If universal waste is accumulated beyond one year, the handler can prove that accumulation was necessary to facilitate proper recovery, treatment or disposal.	**NI**	673.15(2)
H Length of accumulation time is demonstrated by any of the following: **1. Each container is marked or labeled with the earliest date the waste is generated or received.** **2. The individual item of waste is marked or labeled with the date it was generated or received.** **3. An inventory system identifying the date the waste was generated or received is maintained.** **4. The universal waste is placed in a specific accumulation area identified with the earliest date the waste was generated or received.**	**NI**	673.15(3)
i. Employees are trained on the proper handling and emergency procedures appropriate to the types of waste handled at the facility.	**NI**	673.16
J. ALL of the following are met when a release occurs: **1. Release is immediately contained.** **2. A waste determination is made.** **3. Spill residue is disposed of properly as solid or hazardous waste.**	**NI**	673.17
K. Handler sends the waste to a destination facility, foreign destination or another handler. Indicate the facilities in the comments section.	**NI**	673.18(1)
L. For hazardous materials, the handler packages, labels, marks, placards and prepares the proper shipping papers in accordance with DOT requirements in 49 CFR parts 172 to 180.	**NI**	673.18(3)
M. The following activities have occurred. If YES, complete the Universal Waste Small Quantity Handler inspection form. **1. Universal waste are sorted or disassembled.** **2. Recalled pesticides are managed.** **3. Universal waste shipments have been rejected.** **4. Universal waste shipments have included hazardous or solid waste.** **5. Universal waste is self-transported.**	**N**	

TREATMENT & STORAGE FACILITY INSPECTION

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Section 23: Facility Status Evaluation

A. Describe any other activities the facility is conducting.

The site inspection on March 22, 2017, showed that Mid-American Steel Drum (MASD) receives from off-site non-RCRA empty totes containing hazardous waste to their Milwaukee facility. Specifically the following totes from off-site were identified as containing hazardous waste:
a. Numerous totes were observed at the Milwaukee facility having placarding that indicated that the totes contain acids (likely D001), bases (likely D002), and ignitable (likely D001).
b. In the heavy storage area, the department observed two totes. MASD explained that these totes are to be returned to their customer, because the totes are not RCRA empty.
c. In the heavy storage area, the department observed a stainless steel tote (see photo 2). Placarding on the tote showed that the tote contained a class 3 flammable liquid. Labeling on the tote indicated the tote contained Acetone. A Sigma-Aldrich Safety Data Sheet (SDS) for acetone showed a flashpoint of 1.4 °F.
d. During the site inspection on March 22, 2017, MASD explained that one of the hazardous material totes was recently sent off-site as a D001 hazardous waste. The waste in this hazardous material tote is generated by emptying the contents of the non-RCRA empty totes that are received from off-site.

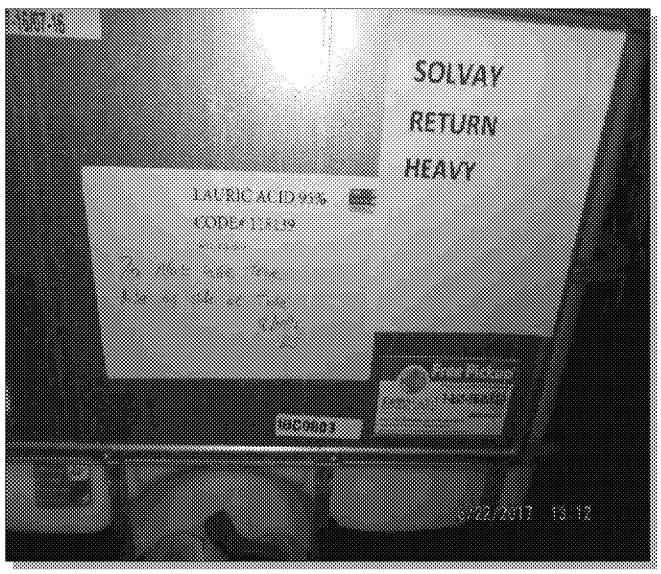
The site inspection on March 22, 2017, showed that Mid-American Steel Drum (MASD) receives from off-site non-RCRA empty totes containing hazardous waste to their Milwaukee facility. When a customer's tote is found to contain material (i.e., waste) approximately 5 to 6 gallons of water is added to the tote. The addition of the water is used to dilute the waste so that it can be safety added to the waste tote. This dilution constitutes treatment if the customer's tote contains a hazardous waste and is not RCRA empty. Additional treatment occurs if, the customer's tote is still a hazardous waste after dilution and is mixed with the facility's waste tote.

HW Transportation.

Key : C: Compliance CA: Compliance with Concern R: Returned to Compliance X: Non-Compliance NA: Not Applicable ND: Not Determined NI: Not Inspecte
Y: Yes N: No UN: Unknown Revision : 07/21/2016
Notes : 1. * Dept. approved alternate may apply 2. Questions without a status entry use narrative responses d_report_sub_cme_package_inspection_ff

SITE PHOTOS

Photo # 47317 Photo 1 of 3
Photo Date & Time 03/22/2017 00:00
Photo Direction INSIDE
Photographer BAERWALD, CATHERINE
Photo Description
Poly tote located in "heavy area".



SITE PHOTOS

Photo # 47318 Photo 2 of 3

Photo Date & Time 03/22/2017 00:00

Photo Direction INSIDE

Photographer BAERWALD, CATHERINE

Photo Description

Steel tote located in "heavy area".

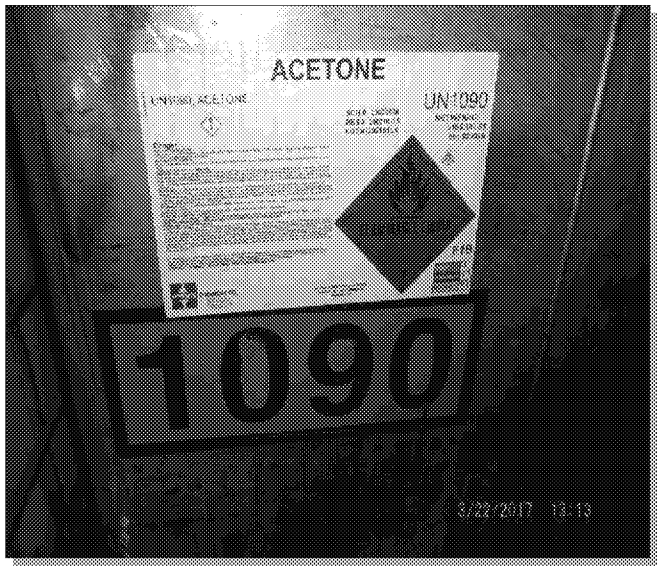


Photo # 47319 Photo 3 of 3

Photo Date & Time 03/22/2017 00:00

Photo Direction INSIDE

Photographer BAERWALD, CATHERINE

Photo Description

Two heavy totes. Located in heavy area west of the reconditioning process.